Assessment of the Status of Health Data for Minority Populations In Montana and Review of Communication Systems Regarding Health Issues with Minority Populations

Prepared For:
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March, 2002

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Project Report

--FINAL--

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"I am in love with Montana. For other states I have admiration, respect, recognition, even same affection, but with Montana it is love..."

John Steinbeck, Travels with Charley

1.0 INTRODUCTION

1.1 GENERAL

The Family and Community Health Bureau, Health Policy and Services Division, Department of Public Health and Human Services (DPHHS) contracted Genesis Counseling Services to compile and analyze existing assessments and data on the health status of Montana's racial and ethnic communities. The scope of this project is not to determine a broad, brush-stroke picture of the status of minority health in Montana, but rather to perform a qualitative study of available primary data. The project purpose is to determine what information is presently available to Montana's minority populations about their health status. Project scope does not include conducting new data-generating health studies or generating primary data.

This report also examines the existing communication systems between the minority populations and health agencies within Montana for the purpose of assessing communication methods and recommending improvements that support the improved health of minority populations.

1.2 DEMOGRAPHICS

Montana is geographically the fourth largest state in the Union, with the forty-fourth largest population estimated at about 902,195 (U.S. Census Bureau, 2002) across 147,042 square miles of territory that range from the high plains in the east to the towering mountains and dense forests in the west. Montana's land area is 445,552 square miles and water area is 1,490 square miles. With a population density of approximately 6.2

persons per square mile of land area, Montana ranks 48th of the 52 states in population density. The State of Montana is classified as frontier based on the criterion of population density. The geography of Montana includes seven Native American Indian reservations: Blackfeet, Crow, Flathead, Fort Belknap, Fort Peck, Northern Cheyenne and Rocky Boy. These reservations occupy 13,084 square miles, which is 9% of the land base of Montana. All of the reservations except Flathead and Blackfeet are found in what is considered eastern Montana.

1.3 POPULATION DIVERSITY

According to the U.S. Census Bureau, the total population of Montana was 902,195 in 2000 (U.S. Census Bureau, 2002). Montana's population is predominantly White (90.58%) with the remaining comprised of Native American (6.21%), Asian American (0.52%), Black (0.30%), Native Hawaiian or other Pacific Islander (0.05%), other (0.59%) and persons with two or more races (1.74%). Hispanic or Latino make up 2.00% of the State's population. 2000 Census data is in Appendix A.

The nine Montana counties with the largest populations (all with populations over 25,000) are Yellowstone, Missoula, Cascade, Flathead, Gallatin, Lewis and Clark, Ravalli, Silver Bow, and Lake. (Table 1-1). Theses counties contain one third of the State's population and over three-quarters of all racial and ethnic minority populations except Native Americans. 65% of the Native American population in Montana lives on Indian reservations. Most Native Americans in Montana not living on reservations live in these counties and their respective urban centers (Billings, Missoula, Great Falls, Kalispell, Bozeman, Helena, Hamilton, Butte and Polson).

1.4 ECONOMICS

Nearly one quarter of Montana's population is college graduates, yet about 15.7% of the population lives below the federal poverty level. Montana's unemployment rate in 1999 was 4.9% compared to the national rate of 4.2%. The average unemployment rate on the State's seven Native American reservations is 11.9%, with the highest rate of 27% on the

TABLE 1-1 INDIAN RESERVATIONS AND 9 MOST POPULOUS COUNTIES

County	Total	White	Native American	Asian	Black	Hawaiian	Other	2 or more races	Hispanic (1)
Montana	902,195	817,229	56,068	4,691	2,692	470	5,315	15,730	18,081
		90.58%	6.21%	0.52%	0.30%	0.05%	0.59%	1.74%	2.00%
Cascade	80,357	78,457	3,394	652	900	67	547	1,900	1,949
Flathead	74,471	73,353	856	346	113	44	305	1,118	1,061
Gallatin	67,831	67,022	598	606	156	43	368	809	1,047
Lake	26,507	25,526	6,306	79	31	11	177	981	668
Lewis and Clark	55,716	54,818	1,137	287	111	28	209	898	843
Missoula	95,802	94,016	2,193	978	261	80	431	1,786	1,543
Ravalli	36,070	35,552	319	108	49	35	158	518	678
Silver Bow	34,606	34,131	704	149	54	21	205	475	950
Yellowstone	129,352	126,933	3,950	698	580	57	1,634	2,419	4,788
9 urban centers Total	600,712	589,808	19,457	3,903	2,255	386	4,034	10,904	13,527
% of State total	66.58%	72.17%	34.70%	83.20%	83.77%	82.13%	75.90%	69.32%	74.81%
other counties	301,483	227,421	36,611	788	437	84	1,281	4,826	4,554
% of State total	33.42%	27.83%	65.30%	16.80%	16.23%	17.87%	24.10%	30.68%	25.19%
Indian Reservation									
Blackfeet Reservation	10,100	1359	8507	4	8	3	20	199	137
Crow Reservation & Trust Lands	6,894	1551	5165	7	1	0	33	137	191
Flathead Reservation	26,172	17814	6999	76	24	10	163	1086	711
Fort Belknap Reservation & Trust Lands	2,959	136	2790	1	4	2	3	23	31
Fort Peck Reservation	10,321	3622	6391	44	4	5	20	235	123
Northern Cheyenne Reservation & Trust Lands	4,470	350	4029	2	1	0	8	80	105
Rocky Boy's Reservation & Trust Lands	2,676	69	2578	2	1	1	2	23	40
Crow/Northern Cheyenne Area	--	24							
7 Reservations Total	63,592	24,925	36,459	136	43	21	249	1,783	1,338
% of State total	7.0%	3.0%	65.0%	2.9%	1.6%	4.5%	4.7%	11.3%	7.4%
% of Reservation total	100.0%	39.2%	57.3%	0.2%	0.1%	0.0%	0.4%	2.8%	2.1%

(1) Hispanics can be of any race.

Rocky Boy Reservation (U.S. Bureau of Labor Statistics, 2000). Nearly 45% of Montana's Indian reservation populations live in poverty. The State's 1989 median household income was $22,988 and the per capita income was $11,213. The State's non-metropolitan 1989 median household income was $22,345 and the per capita income was $10,886. The 1989 median household income on Montana's Indian reservations was about $16,174 and the per capita income was $5,974 (US Census Bureau, 1990).

1.5 AGE STRUCTURE

The average age of Montana's population is 77, which is also the average age of white population. The average age of Montana's Native American population is 62 and the average age of other minority populations in Montana is 67. Approximately 7.7% of the State's population is less than 5 years old and 19.6% is older than age 54. Approximately 10.1% of Native Americans in Montana are younger than age 5 and 10.0% are older than age 54.

1.6 CENSUS SHIFTS

The State's population increased 12.9% from 1990 to 2000. Populations in the nine most populous Montana counties increased 18.5% and populations in the remaining 47 counties increased 3.2%. This information indicates that populations are generally moving from rural to urban areas in the State.

2.0 MINORITY POPULATIONS

2.1 NATIVE AMERICANS

Native Americans comprise the largest racial minority in Montana. At the time of the 2000 Census, it was estimated that 56,068 Native Americans resided in Montana. There are seven reservation trusts and an 8th tribe whose federal recognition was obtained in June of 2000 after a century of legal struggle. Natives inhabit all 56 Montana counties, the largest concentrations existing in Glacier, Big Horn, Lake, Roosevelt, Yellowstone, Cascade and Blaine Counties, in that order.

2.1.1 Reservation Populations

About 65% of Montana's Native American population lives on the State's seven Indian reservations and about 57% of the people living on Montana's Indian reservations are Native Americans. The population density on Montana Indian reservations is 2.8 persons per square mile, which is much less dense than the State's average of 6.2. 65.7% of the reservation populations are 18 or older. 11.9% of the total civilian work force on the reservations was unemployed in 1999. Nearly 45% of the people living on Montana's Indian reservations are living below the poverty level.

Blackfeet Reservation

The Blackfeet Nation is headquartered in Browning, MT. The land area of this reservation is 2,371 square miles. 8,507 of the 10,100 persons, or 84.2%, on this reservation are Native Americans. The population density is 4.26 persons per square mile. 6,274 persons (62.1%) are 18 or older. Based on 1990 Census data, 19.8% of the total civilian work force (3,320 total) was unemployed. The 1989 household income was $14,779 and the per capita income was $5,574. 84.2% of the reservation's population is Native American, 13.5% is white, 2.0 % is mixed and the remaining 0.4% is Black, Asian, Hawaiian or other.

Crow Reservation

The Crow Nation is headquartered in Crow Agency, MT. The land area of this reservation is 3,594 square miles. 5,165 of the 6,894 persons, or 74.9%, on this reservation are Native Americans. The population density is 1.92 persons per square mile. 4,296 persons (62.3%) are 18 or older. Based on 1990 Census data, 21.5% of the total civilian work force (2,924 total) was unemployed. The 1989 household income was $17,269 and the per capita income was $5,729. 74.9% of the reservation's population is Native American, 22.5% is white, 2.0 % is mixed and the remaining 0.6% is Black, Asian, Hawaiian or other.

Flathead Reservation

The Flathead, Confederated Salish and Kootenai are headquartered in Pablo, MT. The land area of this reservation is 1,938 square miles. 6,999 of the 26,172 persons, or 26.7%, on this reservation are Native Americans. The population density is 13.5 persons per square mile. 18,640 persons (71.22%) are 18 or older. Based on 1990 Census data, 5.8% of the total civilian work force (12,352 total) was unemployed. The 1989 household income was $21,061 and the per capita income was $9,059. 26.7% of the reservation's population is Native American, 68.1% is white, 4.2 % is mixed and the remaining 1.0% is Black, Asian, Hawaiian or other.

Fort Belknap Reservation

The Chippewa Nation is headquartered in Harlem, MT. The land area of this reservation is 1,014 square miles. 2,790 of the 2,959 persons, or 94.3%, on this reservation are Native Americans. The population density is 2.92 persons per square mile. 1,733 persons (58.6%) are 18 or older. Based on 1990 Census data, 19.3% of the total civilian work force (758 total) was unemployed. The 1989 household income was $13,051 and the per capita income was $4,821. 94.3% of the reservation's population is Native American, 4.6% is white, 0.8 % is mixed and the remaining 0.3% is Black, Asian, Hawaiian or other.

Fort Peck Reservation

The Assiniboine & Sioux Nations are headquartered in Poplar, MT. The land area of this reservation is 3,289 square miles. 6,391 of the 10,321 persons, or 61.9%, on this reservation are Native Americans. The population density is 3.14 persons per square mile. 6,629 persons (64.2%) are 18 or older. Based on 1990 Census data, 19.8% of the total civilian work force (3,320 total) was unemployed. The 1989 household income was $18,442 and the per capita income was $7,188. 61.9% of the reservation's population is Native American, 35.1% is white, 2.3 % is mixed and the remaining 0.7% is Black, Asian, Hawaiian or other.

Northern Cheyenne Reservation

The Northern Cheyenne Nation is headquartered in Lame Deer, MT. The land area of this reservation is 706 square miles. 4,029 of the 4,470 persons, or 90.1%, on this reservation are Native Americans. The population density is 6.33 persons per square mile. 2,534 persons (56.7%) are 18 or older. Based on 1990 Census data, 20.7% of the total civilian work force (1,413 total) was unemployed. The 1989 household income was $14,417 and the per capita income was $4,970. 90.1% of the reservation's population is Native American, 7.8% is white, 1.8 % is mixed and the remaining 0.3% is Black, Asian, Hawaiian or other.

Rocky Boy Reservation

The Assiniboine & Gros Ventre Nations are headquartered in Box Elder, MT. The land area of this reservation is 171 square miles. 2,578 of the 2.676 persons, or 96.3%, on this reservation are Native Americans. The population density is 15.61 persons per square mile. 1,463 persons (54.7%) are 18 or older. Based on 1990 Census data, 27.0% of the total civilian work force (485 total) was unemployed. The 1989 household income was $16,892 and the per capita income was $4,476. 96.3% of the reservation's population is Native American, 13.5% is white, 2.0 % is mixed and the remaining 0.4% is Black, Asian, Hawaiian or other.

2.1.2 Off-Reservation Populations

About 35% of Montana's Native American population (19,609) does not live on Indian reservations. Most of the State's off-reservation Native American population is in the nine most populated counties (Table 1-1).

Representatives for the non-reservation Little Shell Band of Chippewa Cree are headquartered in Great Falls, MT. The Little Shell Band was federally recognized in June 2000. There are over 4,000 registered tribal members within Montana. The registration process is still ongoing and it is estimated that there are several hundred or thousands more Little Shell members in Montana.

2.1.3 Available Health Statistics

The Center for Disease Control and Prevention (CDC) includes statistics for Native Americans and Alaska Natives in its "other" category for prevalence data under its Behavioral Risk Factor Surveillance System (BRFSS) criteria. DPHHS "Vital Statistics for Montana-1999" indicates heat disease and cancer have been the first and second leading causes on death in Montana claiming the largest numbers of persons of all races and both sexes (DPHHS, 1999). In 1999, the proportion of deaths from homicides was also highest for Native American males, eight times greater than those for whites of both sexes. "Montana's Healthy People 2000 State Plan", formulated in 2000 (DPHHS, 2000b) reports that for Montana Native Americans accidents, diabetes and chronic liver disease and cirrhosis follow heart disease and cancer as leading causes of death. Suicide is the second leading cause of death in Native American males before 54 years of age (42%). According to DPHHS' "2000 Maternal and Child Health Needs Assessment", Montana's priority needs are to decrease the disparities between Native Americans and all Montanan's with regard to infant mortality, cervical cancer rates and diabetes.

2.2 HISPANIC OR LATINO ORIGIN

Hispanics and Latinos constitute Montana's second largest minority. They represent 2% of the State's population (18,081) and reside in all 56 counties. Nearly three-quarters (74.8%) of the State's Hispanic population is in the nine most populated counties (Table

1-1). 26.5% of the State's Hispanic population is in Yellowstone County, followed by Cascade County (10.8%) and Missoula County (8.5%) (Table 1-1).

According to the CDC, Montana's Hispanics have the lowest rate of diabetes incidence, yet the highest pregnancy related gestational type of the disease. 23.2% of Hispanics are at risk for smoking related illnesses, higher than whites but lower than Blacks or Native Americans (BRFSS, 2000). Hispanics and Latinos are fourth for risk factors for health problems related to lack of exercise, all races report over 70% as failing to perform regular and sustained physical activity. 35.4% of all Montana Hispanics have been tested for HIV/AIDS. Hispanics have the second highest incidence of asthma, second only to African Americans. Only 53.8% have had a routine physical exam within the past year. For 16.8%, their last routine checkup occurred five or more years ago.

2.3 ASIAN AMERICANS

At the time of the 2000 Census, it was estimated that 4,691 Asian Americans resided in Montana. 83.2% of the State's Asian American population is in the nine most populated counties (Table 1-1). 20.8% of the State's Asian American population is in Missoula County, followed by Yellowstone County (14.9%) and Cascade County (13.9%). No race specific health data was found for Asian Americans in Montana.

2.4 BLACKS

According to 2000 Census data, Blacks constitute only 0.3% of Montana's population, with only 2,692 African Americans residing in the "Big Sky County". 74.8% of the State's Black population is in the nine most populated counties (Table 1-1) but there are African Americans in all but eight of Montana's 56 counties. One third (33.4%) of the State's Black population is in Cascade County, followed by Yellowstone County (21.5%) and Missoula County (9.7%).

Blacks reported the highest incidence of diabetes but the lowest prevalence of gestational pregnancy related diabetes. 66% of all Blacks in Montana have been tested for HIV/AIDS, while only 37.8% of all whites have been tested.

According to the CDC's BRFSS, 38.7% of all Blacks in Montana report a doctor has told them that they have asthma. This is only 4% less than all other races combined. Blacks appear to have high rates of risk for smoking related illnesses and health problems related to lack of exercise. 34.2% of Montana's Black population report there was a time in the past year when they needed to see a doctor but could not compared to 10.1% of whites.

2.5 NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDERS

At the time of the 2000 Census, it was estimated that 470 Native Americans resided in Montana. 82.1% of the State's Native Hawaiian/P.I. population is in the nine most populated counties (Table 1-1). 17.0% of the State's Native Hawaiian population is in Missoula County, followed by Cascade County (14.3 %) and Yellowstone County (12.1%). No race specific health data was found for Native Hawaiians in Montana.

2.6 OTHERS

At the time of the 2000 Census, it was estimated that 5,315 persons of races other than white, Native American, Asian, Black or Native Hawaiian resided in Montana. 75.9% of the State's population of other races is in the nine most populated counties (Table 1-1). 30.7% of the State's other race populations are in Yellowstone County, followed by Cascade County (10.3%) and Missoula County (8.1%).

2.7 MIXED RACES

At the time of the 2000 Census, it was estimated that 15,730 persons residing in Montana stated they were two or more races. 69.3% of the State's mixed race population is in the nine most populated counties (Table 1-1). 15.4% of the State's Hispanic population is in

Yellowstone County, followed by Cascade County (12.1%) and Missoula County (11.4%).

2.8 HIDDEN MINORITIES

Other minority populations include migrant and seasonal farm workers. The Billings Migrant Health Center estimated that approximately 12,400 migrant workers and their families received health services in 1999 at the Billings clinic or one of the six other satellite migrant health clinics across Montana. There are also approximately 300 Russians and 200 Southeast Asians in the Missoula area. Translator services have actively been pursued in these areas to assist in meeting the health care needs of immigrant and migrant populations (MCH, 2000).

Montana also has a population of approximately 3,000 to 4,000 Hutterites living in 30 to 35 colonies across the State. Hutterites are not specifically identified in the census data. They are of German-European descent and are often confused with the Amish. The Hutterites experience a high incidence of agricultural related injuries, especially to children, and this has become a health concern. Potential health issues for the population are related to health care practices, cultural isolation and the potential for genetic disorders due to intermarriage (MCH, 2000).

Although demographics for all hidden minority groups in Montana may be significant from a health standpoint, data is not compiled and disseminated with other minority health data. Montana communities have not performed many studies on these hidden minority groups, but instead, have submitted basic count numbers into national databases, who in turn, have performed studies beyond the scope of this project.

3.0 EXISTING HEALTH ASSESSMENTS AND DATA

This section describes the project contacts and existing assessments and data. It also contains a brief summary of compiled information. Genesis reviewed, compiled and analyzed existing assessments and health status data on minority populations including but not limited to the American Indian and migrant populations. This information included reports from state programs and agencies, IHS reports, tribal health service reports and federal reports.

3.1 PROJECT CONTACTS

Project contacts were asked if they were aware of any health studies that had been done on Native Americans or other racial or ethnic minority populations in Montana. Most initial contacts were made via telephone. The complete list of individuals and agencies contacted for this project is shown as Table 3-1. The initial contact list is included in this report as Appendix B. A data sheet and/or communications memo data sheet was filled out for all project contacts. Sample Data Sheets and Communications Memos are in Appendix C. Completed data sheets with project contact conversation and meeting notes are available upon request and will be on file with the FCHB upon completion of this project.

3.2 SUMMARIZED LIST OF EXISTING HEALTH ASSESSMENTS AND DATA

A summarized list of compiled information and notes from discussions with project contacts during the execution of this project is in Appendix D. Contacts were asked if they were aware of any studies involving health issues for Montana's minority populations and for their input on trends, consistencies and information gaps. Contacts were also asked about existing communication practices and for suggestions for communication improvements and other ideas that may improve receipt of updated information and data. Existing studies are summarized in Table 3-2. Applicable 2000 census data for Montana tribal statistics is in Appendix A of this report.

TABLE 3-1 PROJECT CONTACTS

AGENCY	TYPE	ADDRESS	CITY	ZIP	CONTACT	TITLE	PHONE	FAX
WESTERN MONTANA								
St. Peter's Hospital	Community Hospital	2555 Broadway	Helena, MT	59601	Yvonne Beasley	Administrative Executive	406-444-2480	
					Jenny Nemek	ER Administrator	406-444-2202	
					Tamora,Professional Quality Service Dept		406-444-2480	
Wheatland Memorial Hospital	Community Hospital	P.O. Box 287	Harlowton, MT	59036	Lori Pritchard, R.N.	Director of Nursing		
Office of Public Assistance for Flathead County	County Welfare Office	P.O. Box 1096	Kalispell, MT	59903	Casandra		406-751-5900	
Flathead Tribal Health and Human Services	Federal Health Department	P.O Box 280	St. Ignatius, MT	59865	Lorrie Meeks		406-745-3525	
Fort Belknap Service Unit-Harlem	PHS Indian Health Center		Harlem, MT	59526	Desree Bell	Acting Clinical Director	406-353-3100	
Fort Peck Service Unit-Poplar	PHS Indian Health Center		Poplar, MT	59255	Julie Bemer, DPHN	Clinical Director	406-768-3491	
Rocky Boy Service Unit	PHS Indian Health Center	Box 664	Box Elder, MT	59521	Connie Florez		406-395-4486 ext 244	
					Janet Runyon		406-395-4486	
					Sybil Sangrey	Planning Director	406-395-4982	
Blackfeet Service Unit - Browning	PHS Indian Hospital		Browning, MT		Reis Fisher	Service unit Director	406-338-6154	
					Jennifer Swanson	Clinical Director	406-338-6200	406-338-6214
Mountain Pacific Quality Health Foundation	Private, Not for Profit	Foundation	Helena, MT	59601	Sarah Melody		406-443-4020	
Planned Parenthood	Private, Not for Profit	1500 Cannon	Helena, MT	59601	Deb	Director/Program Manager	406-443-7676	
Harm Reduction Center	Private, Not for Profit	Foundation	Missoula, MT	59801	Vicki Peterson	or 406-544-5821	406-721-3000 ext 1140	
Rural Employment Opportunites	Private, Not for Profit	P.O. Box 831	Helena, MT	59624	Sharon Liedermnan	Director	406-442-7850	406-442-7855
The Commonwealth Fund	Private, Not for Profit	One East 75th Street	New York, NY	10021	Ruth T Perot/Mara Youdelman	Foundation	212-606-3800	212-606-3500
Montana Department of Puhlic Health and Human Services (DPHHS)	State Health Department	1400 Broadway, Cogswell Building, C-317, P.O.Box 202951	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	404-444-7465
Montana Department of Public Health and Human Services (DPHHS)	State Health Department	555 Fuller, P.O. Box 202905	Helena, MT	59620	Phyliss MacMillan	Program Director, Addictive and Mental Disorders Division	406-444-7044	
Montana Department of Public Health and Human Services (DPHHS)	State Health Department	1400 Broadway, Cogswell Building, C-118,	Helena, MT	59620	L McNamara, Bill Riley, MSW (Gemini Consulting)	Addictive and Mental Disorders Division	406-444-3964	
Wyoming Minority Health Program - Maternal and Child	State Health Department		Internet	Internet				
Office of Indian Affairs	State Native American Liason	Room 202, State Capitol Building	Helena, MT		Bruce Meyers	Director	406-444-3703	406-444-1350
					Lori Ryan	Administrative Assistant	406-444-3703	406-444-1350
Blackfeet Tribal Business Council	Tribal Nation Headquarters	Box 850, Blackfeet Agency	Browning, MT	59417	Earl Old Person	Chair	406-338-7521	
Chippewa Cree Business Committee	Tribal Nation Headquarters	Rocy Boy Route #544	Box Elder, MT	59521	Alvin Windy Boy	Chair	406-395-4282	406-395-4497
Confederated Salish and Kootenai Tribe	Tribal Nation Headquarters	P.O Box 278	Pahlo, MT	59855	Fred Matt	Chair	406-675-2700	406-675-2806
Fort Belknap Tribal Council	Tribal Nation Headquarters	RR #1, Box 66	Harlem, MT	59526	Joe McConnell	Chair	406-353-2205	406-353-4541
					Kermit	Chair	406-353-8486	406-353-4541

TABLE 3-1 PROJECT CONTACTS

AGENCY	TYPE	ADDRESS	CITY	ZIP	CONTACT	TITLE	PHONE	FAX
Fort Peck Council (Assiniboine + Sioux)	Tribal Nation Headquarters	P.O. Box 1207, Ft Peck Agency	Poplar, MT	59255	Arlyn Headress	Chair	406-768-5155	406-768-5478
					Gary James Melbane	Tribal H	406-768-3491	
Little Shell Tribe of the Chippewa Cree	Tribal Nation Headquarters	Box 1384, 105 Smelter Ave.	Great Falls, MT	59403	Tim Zimmerman	Chair	406-452-2892	406-452-2892
Carroll College	University/College	1601 N. Benton	Helena, MT	59601	Murphy Fox	Sociology Professor	406-447-4300	
Flathead Community College	University/College	777 Grandview Drive	Kalispell, MT	59901			406-756-3822	
Montana State University-Airogram	University/College	MSU-American Indian Research Office (AIRO)	Internet	Internet	Ken Pepion	PhD		
Salish Kootenai College	University/College		Pablo, MT	59855	Phyllis Scharr		406-675-4800	4006-275-4913
Helena Indian Alliance	Urban Indian Center	436 N. Jackson	Helena, MT	59601	Ed Barrett	CDC	406-442-9244 ext 11	406-449-5371
					Leo Pocha		406-442-9244 ext 12	406-449-5371
					Daren Melton		406-442-9244 ext 13	406-449-5371
					Bonnie LaFontaine		406-442-9244 ext 16	406-449-5371
					Sandy		406-442-9244 ext 18	406-449-5371
					Beth Sirr	FNP	406-442-9244 ext 20	406-449-5371
Indian Health Clinic	Urban Indian Center	1220 Central, Suite 2-B	Great Falls, MT	59401	D.J. Lott	Director	406-268-1510	
Missoula Indian Center	Urban Indian Center	2300 Regent Street, Suite A	Missoula, MT	59801	Carol Meyers		406-829-9515	
					Kitty	or 406-329-3373	406-829-9515	
North American Indian Alliance	Urban Indian Center	P.O. Box 285	Butte, MT	59701	Moke Eagle Feathers / Patty Boggs		406-782-0461	406-782-7435
EASTERN MONTANA								
Billings Area Indian Health Services	Federal Health Department	2900 4th Avenue, P.O. Box 36600	Billings, MT	59107	Pete Conway	New Director	406-247-7107	406-247-7230
					George Allen	Acting Director	406-247-7099	406-247-7230
					Diane L Jeanotte	Area Child and Maternal Health Officer	406-247-7125	406-247-7230
					Charles Lewis		406-247-7104	406-247-7230
					Mike Danielson		406-247-7106	406-247-7230
Migrant Health Services	Federal Health Department	3318 3rd Ave N, suite 100	Billings, MT	59101	Claudia Stevens	Director	406-248-3149	
Lodge Grass Clinic	PHS Indian Health Center		Lodge Grass, MT	59050	Dan Gun Shows		406-639-2317	
Northern Cheyenne-Lame Deer Health Center	PHS Indian Health Center		Lame Deer, MT	59043	Gina Milligan	Acting Clinical Director	406-477-4400	
Wolf Point Indiam Health Center	PHS Indian Health Center		Wolf Point, MT	59201	Charles Headdress	Clinical Director	406-653-1641	
Crow Agency Unit	PHS Indian Hospital		Crow Agency, MT	59022	Dr. Thomas	Clinical Director	406-638-3500	
					Tennyson Doney	Service unit Director	406-638-3461	
					Dr Jean Parker		406-638-3500	
Crow Tribal Council	Tribal Nation Headquarters	P.O. Box 159	Crow Agency, MT	59022	Clifford Birdinground	Chair	406-638-3700	406-638-3889
Northern CheyenneTribal Council	Tribal Nation Headquarters	P.O. Box 128	Lame Deer, MT	59043	Geri Small	Chair	406-477-6284	406-477-6210
					Marlene Redneck		406-477-8549	
Montana State University-Billings	University/College		Billings, MT	59101	Annette Trinity-Stevens/Evelyn Boswell			
Miles City Center	Urban Indian Center	504 Main, P O. Box 726	Miles City, MT	59301	Ernie Bighorn	Director	406-232-6112	406-232-3148
Montana United Indian Association	Urban Indian Center	207 North Broadway	Billings, MT	59101	Mike LaFromboise	Acting Director	406-247-5069	

TABLE 3-2 EXISTING STUDIES AND HEALTH ASSESSMENTS

#	Contact Agency	Study	Study Dates	Date Study Published	Funding Agency
1	Wheatland Memorial Hospital-Harlowton	Demonstration project is currently in progress. Outreach education and health promotion to Duncan Colony (Hutterite). Childhood issues, depression assessment, reduction in farm injury to children.	12/01 to 12/02	12/31/03	Montana DPHHS, FCHB
2	Rural Employment Opportunites	REO contracted with National Cancer Institute and OSHA	1999 and 2000 (2 summer seasons)		National REO. Data not counted as Montana statistics, went into national data bases. Did some informal surveys.
3	The Commonwealth Fund	Racial, Ethnic + Primary Language, Data Collection in the Health Care System: An Assessment of Federal Policies and Practices		Sep-01	The commonwealth Fund and Summit Health Institute for Reserch and Education (SHIRE)
4	Montana DPHHS	Establishing Surveillance for Diabetes in American Indian Youth	1997-1999	Jun-01	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
5	Montana DPHHS	Prevalence of Cardiovascular Disease and Related Risk Factors in American Indian and Non-Indian Adults in Montana, 1999	1999	Jan-00	Chronic Desease Prevention and Health Promotion Program, DPHHS
5	Montana DPHHS	Increasing Prevalence of Diagnosed Diabetes and Obesity	1988-1993 to 1994-1999	Oct-00	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
6	Montana DPHHS	The Rise in Overweight and Obesity Among Montanans	1988-1993 to 1994-1999	Jun-01	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
7	Montana DPHHS	Improving Diebetes Care for American Indians in Montana and Wyoming	1994-1999	1994-1999	Montana DPHHS - Montana Diabetes Project and Billings Area Indian Health Service Diabetes Program, Centers for Disease Control and Prevention (CDC), Division of Diabetes Translation
8	Montana DPHHS	Cardiovascular Disease and Risk Factors in Montana American Indians and Non-Indians.		2001	Montana DPHHS - Centers for Disease Control and Prevention (CDC), Division of Diabetes Translation
9	Montana DPHHS	The Montana Tobacco Quit Line: A new statewide Resource to help people quit tobacco		Jan-01	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
10	Montana DPHHS	Montana Tobacco Use Prevention Program (28 community based entities to provide prevention services throughout 40 of Montana's 56 counties)	1999-2000	various dates	DPHHS, funding was cut substantially in 2001
11	Montana DPHHS	Native American Substance Abuse Treatment Needs Assesment Study	Awarded 1996	Jul-01	Center for Substance Abuse Treatment (CSAT) - "Montana Adult Householdtelephone Survey"

TABLE 3-2 EXISTING STUDIES AND HEALTH ASSESSMENTS

#	Contact Agency	Study	Study Dates	Date Study Published	Funding Agency
12	Montana DPHHS	Montana Behavioral Risk Factor Surveillance System (BRFSS)	1997 - 1998, 1999	April 2000, March 2001	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
13	Montana DPHHS	Priorities: Montana Health Agenda 2000 (Montana's Healthy People 2010 State Plan)		Jan-00	Montana DPHHS - Health Policy and Services Division
14	Montana DPHHS	Maternal and Child Health Needs Assessment	1995-1999	Jul-00	Montana DPHHS, FCHB
15	Montana DPHHS, Addictive + Mental Disorders Division (AMDD)	Substance Use Disorders Needs Assessment - The Adult Household Telephone Survey	1995-1997 (18 months)	Jul-01	Center for Substance Abuse Treatment (CSAT),
16	Montana DPHHS, Addictive + Mental Disorders Division (AMDD)	Substance Use Disorders Needs Assessment - Inmates in Montana's Correctional System.	1995-1997 (18 months)	Jul-01	Center for Substance Abuse Treatment (CSAT), Substance Use Disorders Needs Assessment Summary
17	Wyoming Minority Health Program - Maternal and Child, Wyoming Primary Care Association (WPCA)	An Assessment of the Health Status of Minority Populations in Wyoming	Sept 2000 - Sept 2001	Sep-01	OMH, U.S. Dept of Health and Human Services
18	Montana State University-Airogram	Psycho-Social Adjustment of American Indian College Students	1988 - 1990	1991	MSU / U of A - AIRO (American Indian Research Office)
19	Helena Indian Alliance	Tobaco Use of Native Americans	1999	2000	DPHHS
20	Billings Area Indian Health Services	Regional Differences in Indian Health	1998-1999	1999	US Dept of Health and Human Services, Indian Health Service, OPH Division of Community and Environmental Health
21	Billings Area Indian Health Services	Trends in Indian Health	1999	1999	US Dept of Health and Human Services, Indian Health Service, OPH Division of Community and Environmental Health
22	Migrant Health Services	National Cancer Institute-Multi-tiered project to track relationship bewteen Farm Laborers and cancer			Federal Dept of Health and Human Services
23	Migrant Health Services	Presently putting together an oral program that will be stationary and moble. Had a Pilot for kids. Antitiepating now for addults,			Federal Dept of Health and Human Services
24	Montana State University-Billings (student study)	Student Hutterite Health Study	1999-Early 2000	May-00	MSU-Billings campus
25	Office of Indian Affairs	2000 Census Data available to build tables and conduct studies			Montana Department of Commerce

3.2.1 Montana Behavioral Risk Factor Surveillance System

The Health Planning and Evaluation Section, DPHHS, publishes the "BRFSS Assessing Health Risks in Montana". It segregates racial statistics by white non-Hispanic and non-white or Hispanic, and presents a large amount of useful statistics and information. Table 3-3 summarizes readily available minority health information provided in this publication.

3.2.2 Office of Vital Statistics

The Office of Vital Statistics, DPHHS, publication entitled "2000 Montana Vital Statistics" provides the following statistical data, which is available for analysis:

- Natality (Fertility, Births outside hospitals, Mother's age, race and marital status, and method of delivery)
- Mortality (fetal, infant and maternal deaths, age-specific and age adjusted death rates, age sex and race, and years of potential life lost)
- Cancer incidence and prevalence (cancer incidence by primary site, prostate, breast cancer, lung cancer, and colorectal)
- Induced abortion
- Marriage
- Divorce
- Communicable disease program (from other DPHHS office)
- STDs (from other DPHHS office)

Although a tremendous amount of information is available from this agency, the document itself does not contain much useful information sorted on the basis of race. The staff, however, is available for sorting and compiling statistical data that would be very useful in assessing the health status of minority populations. All of the parameters listed above can be sorted according to race and location.

The "2000 Montana Vital Statistics" reports states that the fertility rates for mothers of all races has dropped slightly during the last decade and that fertility rates for Native Americans were two or more times as high in all age groups that for Whites.

TABLE 3-3 SUMMARY OF INFORMATION FROM 1999-BRFSS ASSESSING HEALTH RISKS IN MONTANA

Category	Deomgraphic Group			Non-White or Hispanic Compared to White Non-Hispanic	Source	Page
	All Adults	White Non Hispanic	Non-White or Hispanic			
BRFSS Sample						
1999	1,798	1,671	122		Table 2	pg 4
Unweighted		92.9	6.8		Table 2	pg 4
Weighted		92.3	7.2		Table 2	pg 4
1999 Census Estimate						
1999 Census Estimate	658,960	611,503	47,457		Table 2	pg 4
% of total Population	100	92.8	7.8		Table 2	pg 4
Fair or poor Health	10.9	10.2	19.7	higher	Table 3	pg 10
Physical Health not good 1+ days in past month	32.6	32.1	39.8	higher	Table 3	pg 10
Mental Health not good 1+ days in past month	31.0	30.5	37.8	higher	Table 3	pg 10
No Health Insurance	17.0	16.2	27.1	higher	Table 4	pg 12
Had Routine Checkup Last Year	64.2	64.2	64.3	similar	Table 4	pg 12
Couldn't Afford Doctor Last Year	12.4	11.5	23.9	higher	Table 4	pg 12
Overweight	52.7	52.3	59.5	higher	Table 5	pg 14
Obese	15.8	15.3	23.1	higher	Table 5	pg 14
Visited dentist in the past year	63.7	64.0	61.0	lower	Table 6	pg 16
Had 6 or more permanent teeth removed	18.9	18.7	22.0	higher	Table 6	pg 16
Teeth cleaned in the past year	61.7	62.9	48.7	lower	Table 6	pg 16
Ever Told Blood Pressure High	23.2	23.0	25.6	higher	Table 7	pg 19
Blood Pressure checked in last 2 years	93.3	93.2	93.9	similar	Table 7	pg 19
Ever had blood cholesterol checked	71.3	72.8	51.2	lower	Table 8	pg 21
Blood cholesterol checked in past 5 years	65.0	66.2	49.3	lower	Table 8	pg 21
Ever told blood cholesterol high	30.5	30.2	35.2	higher	Table 8	pg 21
Binge Drinking	17.6	17.4	18.5	similar	Table 9	pg 23
Chronic Drinking	3.6	3.8	0.4	lower	Table 9	pg 23
Drinking and Driving	3.4	3.3	2.5	similar	Table 9	pg 23
Child always wears bike helmet	34.4	35.2	--		Table 10	pg 25
Have a smoke detector in the home	94.8	94.8	95.2	similar	Table 10	pg 25
Tested smoke detector in the past 6 months	61.2	60.9	66.6	higher	Table 10	pg 25
Current smoker	20.2	18.7	40.5	higher	Table 11	pg 28
Quit smoking for at least 1 day	48.0	46.3	--		Table 11	pg 28
Current smokeless tobacco	6.2	6.2	3.6	lower	Table 11	pg 28
Told have diabetes	5.9	5.3	11.1	higher	Table 12	pg 30
Had a flu vaccination in past year	72.9	72.8	--		Table 12	pg 30
Ever had a pneumonia vaccination	61.2	60.7	--		Table 12	pg 30
Ever had a clinical breast exam (females)	95.2	94.8	--		Table 13	pg 33
Ever had a mammogram (females)	85.8	86.4	--		Table 13	pg 33
Ever had both (females)	83.1	83.5	--		Table 13	pg 33
Age 50+ and had both in past 2 years	66.4	66.5	--		Table 13	pg 33
Ever had a Pap test	97.0	96.7	100.0	higher	Table 14	pg 35
Had Pap test in past 3 years	85.2	84.8	90.7	higher	Table 14	pg 35

-- Subgroup sample size too small and associated confidence interval too broad to yield meaningful comparison.

For the purposes of this table, "similar" is defined as being + or - 2%, which is the confidence level of this study.

3.2.3 Regional Differences in Indian Health

The Indian Health Service, Office of Public Health (OPH), Division of Community and Environmental Health prepared this publication. It contains a great deal of very useful information for assessing the health status of Native American populations in areas services by IHS. It compares statistics for the Billings service area to other IHS Service areas and to similar U.S. all race statistics. It does not, however, contain statistical information pertaining to all races in Montana. Table 3-4 summarizes readily available minority health information provided in this publication.

The publication reports leading cause of death (all age groups) of Natives in the Billings service area to be diseases of the heart (21.0%), malignant neoplasms (16.6%), accidents and adverse effects (15.1%), Diabetes Mellitus (6.2%) and chronic liver disease and cirrhosis (4.4%). The leading causes of death in America are diseases of the heart (31.9%), malignant neoplasms (23.3%), Cerebrovascular diseases (6.8%), chronic obstructive pulmonary diseases (COPD, 4.5%) and accidents and adverse effects (4.0%). It also reports the leading causes of infant death for Native Americans in the Billings service area are congenital anomalies (31.6%), Sudden Infant Death Syndrome (SIDS, 13.2%), and newborns affected by complications of placenta (10.5%). Leading causes of infant death in the U.S. are SIDS (21.9%), congenital anomalies (21.3%) and disorders related to short gestation and low birth weight (6.2%).

3.2.4 Maternal & Child Health Needs Assessment

Information presented in this study focuses on primarily the maternal-child population of Montana but does contain some useful information for assessing the health status of minority populations in this specific health area. This study utilizes several of the other studies mentioned in this report for statistical comparisons. It reports that there continues to be disparity between White and Native American populations related to infant mortality, with Native Americans having a higher infant mortality rate. During the 1990s the leading cause of death of Native American infants in Montana changed from SIDS to congenital anomalies. It reports that Native American youths are much more sexually active than Montanans as a whole, and that they utilize condoms less and receive less

TABLE 3-4 SUMMARY OF INFORMATION FROM IHS
REGIONAL DIFFERENCES IN INDIAN HEALTH

Section	Category	Deomgraphic Group			Chart	pg	Trends
		US All Races	IHS Total	Billings Area IHS			Billings Area Native Americans vs US All
Part 2	Population Statistics-Fiscal Year 1997						
	User Population		1,300,634	64,780	2.1	27	
	% Female	51.2	52.3	50.5	2.2	27	similar
	% User population under age 5	7.7	10.2	10.1	2.3	28	higher
	% User population over age 54	19.6	11.1	10.0	2.4	28	lower
	% High School Graduate or Higher, Age 25 and older	75.2	65.3	67.6	2.5	29	lower
	% Bachelor's or Higher, Age 25 and older	20.3	8.9	7.6	2.6	29	much lower
	% Males Unemployed, Age 16 and older	6.4	16.2	29.8	2.7	30	much higher
	% Females Unemployed, Age 16 and older	6.2	13.4	21.0	2.8	30	much higher
	Median Household Income in 1989	$30,056	$19,897	$14,249	2.9	31	much lower
	% of Population Below Poverty Level	13.1	31.6	44.6	2.10	31	much higher
Part 3	% Birth Rates	14.8	24.1	25.7	3.1	33	much higher
	% Low Weight Births	7.3	6.0	6.2	3.2	34	similar
	% High Weight Births	10.3	12.7	14.2	3.3	35	higher
	% Live Births with Prenatal Care Beginning in 1st Trimester	81.3	66.5	66.3	3.4	36	much lower
	% Mothers who Drank During Pregnancy	1.5	4.5	7.5	3.5	37	higher
	% Mothers who Smoked During Pregnancy	13.9	20.4	31.6	3.6	38	much higher
	% Birth Rates with Diabetic Mother	25.2	45.2	31.7	3.7	39	higher
	% 1st Cesarian Delivery	14.7	11.9	13.3	3.8	40	similar
	% Vaginal Births After Previous Cesarian Delivery	27.5	31.4	25.9	3.9	40	similar
	% Infant Mortality Rates (Under 1 year)	7.6	9.3	10.1	3.11	42	higher
	% Neonatal Mortality Rates (Under 28 days)	4.9	4.5	5.4	3.12	43	similar
	% Postneonatal Mortality Rates (28 days to 1 year)	2.7	4.8	3.9	3.13	44	similar
	Sudden Infant Death Syndrome Rates	87.1	204.0	123.0	3.28	52	much higher
	(rate per 100,000 live births)						
Part 4	*Data in Part 4 listed as rate per 100,000 population*						
	Age-Adjusted Dealth Rates (All Causes)	503.9	699.3	923.0	4.1		much higher
	Years of Potential Life Lost Rates (All Causes)	53.7	91.5	102.9	4.2		much higher
	Age-Adjusted Dealth Rates (All Causes)	30.5	92.6	119.8	4.17		much higher
	Motor Vehicle	14.2	38.6	44.9	4.18		much higher
	Suicide	11.2	19.3	24.3	4.19		much higher
	Homicide	9.4	15.3	19.3	4.20		much higher
	Firearms	13.9	18.9	24.8	4.21		much higher
	Injury and Poisoning	1.2	2.4	5.0	4.22		much higher
	Alcoholism	6.7	48.7	60.6	4.23		much higher
	Diabetes Mellitus	13.3	46.4	64.5	4.24		much higher
	Pneumonia and Flu	12.9	22.0	30.6	4.25		much higher
	Tuberculosis	0.3	1.9	2.7	4.26		much higher
	Gastrointestinal Diseases	1.2	1.7	1.8	4.27		much higher
	Heart Disease	138.3	156.0	190.0	4.28		much higher
	Cerebrovascular Diseases	26.7	30.5	43.0	4.29		much higher
	Malignant Neoplasm	129.9	116.6	173.3	4.30		much higher
	Lung Cancer	38.3	31.7	69.7	4.31		much higher
	Breast Cancer	21.1	14.5	20.7	4.32		similar
	Cervical Cancer	2.5	3.8	1.4	4.33		much lower
	Colon-Rectal Cancer	12.6	12.6	13.7	4.34		similar
	Prostate Cancer	15.4	12.9	19.4	4.35		similar
	HIV	15.6	6.2	6.0	4.36		much lower
	Life Expectancy at Birth - Both Sexes (Actual)	75.8	71.1	67.2	4.37		much lower
	Life Expectancy at Birth - Males (Actual)	72.5	67.6	63.6	4.38		much lower
	Life Expectancy at Birth - Females (Actual)	78.9	74.7	70.8	4.39		much lower

HIV education. The assessment states that Migrant Children's Health Care program provides Migrant children between the ages of 1 and 21 with health care checks.

3.2.5 Montana Diabetes Project

The Chronic Disease Prevention and Health Promotion Program, DPHHS, publishes the "Montana Diabetes Surveillance Clinical Communication-Montana Diabetes Project" on a quarterly basis. It typically segregates racial statistics by white and non-white, but presents timely and useful statistics and information. The prevalence of diagnosed diabetes among adult Montanans between 1988-1993 for Whites was 4.0% and for Non-Whites was 7.5%. Between 1994-1999, the prevalence of diabetes increased in both groups to 5% for Whites and 9.4% for Non-Whites (October-December, 2000). The January-March, 2001 issue compared smoking and diabetes between American Indians and Whites. In both genders and all age groups examined, American Indians with and without diabetes have a substantially greater incidence of smoking; nearly two times the rate of Whites. The January-March 2000 issue examined the prevalence of cardiovascular disease and related risk factors in American Indians and Non-Indian adults. It concluded that among respondents over the age of 45, 21% of American Indians and 13% of non-Indians have experienced a stroke, myocardial infarct or angina. Both racial groups were more likely go report cardiovascular disease over the age of 45. Individuals with diabetes were more likely to report other cardiovascular disease risk factors (hypertension, high cholesterol, overweight) than those without diabetes. Over 20% of the non-Indian and over 40% of the Indians reported current smoking.

3.2.6 Montana Health Agenda

The Montana's Healthy People 2010 State Plan, DPHHS, publishes the "Montana Health Agenda 2000" bi-annually. It provides much information and lists risk factors associated with minority populations in Montana. The plan states that minority populations in Montana are over represented in deaths and morbidity from disease or other conditions. Whites typically die at an older age than Native Americans do. One quarter of white persons died at below age 65, while one fourth of Native Americans died at below age 40. The median age for death of white women was 80, for Native American women, it

was 65 years. The median age of death of white men reportedly was 74, for Native American men it was 58. White women are more likely to have early prenatal care than non-white women. A notable exception is that women whose pregnancy care is provided through IHS consistently receive earlier, more adequate care than other non-white Montana women. One of the plan goals is in the area of sexually transmitted disease prevention is to keep the rate of chlamydia at or below 174 per 100,000 persons in Montana is 2000 and reduce it to 140 per 100,000 by 2005. The plan goal is to reduce the rate of chlamydia among Native Americans to 900 per 100,000 by 2005. The report says that suicide is the 2nd leading cause of death in Native American males before 54 years of age.

3.2.7 Center for Substance Abuse Treatment

The Addictive and Mental Disorders Division, DPHHS, completed and published the "Native American Substance Abuse Treatment Needs Study" in July 2001. In 1996 DPHHS was awarded a contract from the Center for Substance Abuse Treatment (CSAT) for the Montana "Adult Household Telephone Survey". The purpose of the study was to determine the need for substance treatment services throughout Montana. When the statewide telephone survey was completed, a concern was raised that Native American people living on the reservations may not have been fairly represented in the study because of poor telephone coverage on the reservations. A separate CSAT needs assessment was completed for Montana Reservations. In addition to estimating the need for substance abuse treatment services, the survey identifies barriers to treatment faced by Native Americans on Montana reservations such as transportation to treatment programs, child care services enabling parents with children to receive treatment, reasonable distances to available treatment programs and necessary aftercare services and/or living facilities following treatment. The study also collected data regarding a number of other issues including information about diabetes, other medical and mental health conditions, tobacco use, tribal affiliations, income and household size.

The study concluded that lifetime and recent alcohol use prevalence for Native American adults living on Montana reservations are very similar to those reported throughout the

rest of the State. Illicit drug use is substantially higher on the reservations than else where in Montana. The prevalence of alcohol dependence is more than three times higher for Indians on Montana reservations (12.8%) than for the rest of the state (3.7%) and drug dependence is four times higher (5.9% versus 1.4%). Over one in every four adults on the reservations need substance abuse treatment but only about one in thirty actually seeks and receives treatment. One out of every eight individuals needing treatment is seeking any treatment. Low-income Native American adults are twice as likely to need treatment as higher income Native American adults. Young men have the highest treatment need prevalence (48%) and they are much less likely than other adults to seek treatment. About one out of every four pregnant women on Montana reservations needs treatment for alcohol abuse or an alcohol dependency. The need for treatment services greatly exceeds the supply of services. The assessment also concluded that the most important constraints facing those seeking treatment were capacity and transportation concerns.

3.2.8 U.S. Census Bureau

The U.S. Census Bureau collects and disseminates large volumes of essential population size and distribution information. Information collected by the census is demographic in nature. Relevant data from the 2000 Census is in Appendix A. It should be noted that Montana's minority populations might have been largely undercounted in all census surveys.

3.2.9 Additional Information

In 1998, the Robert Wood Johnson and W. K. Kellogg Foundations funded Montana's Turning Point Initiative to create a strategic improvement plan for Montana's public health system in addition to an action plan for implementing changes and improvements. Despite a well thought out strategic plan and improvement design, minority health was not specifically addressed. The issue was touched on, however, by the inclusion of the DPHHS Native American Advisory Group and numerous representatives from Indian Country.

The Montana DPHHS is the primary sponsor and contact for existing studies and assessments including or focusing on minority health issues. Several federal agencies have also done studies on the health status of minority populations. Indian Health Service (IHS) has recently published two reports: Regional Differences in Indian Health (1998-1999) and Trends in Indian Health (1999). IHS is the primary federal contact for Native American health issues.

The U.S. Department of Interior has done numerous studies targeting minority populations, and specifically, Native Americans. The studies include lead contamination, past mining health legacy's, health problems resulting from coal exposure, water treatment and wastewater treatment plant audits, water quality program studies, reclamation studies.

The U.S. Fish and Wildlife service has performed studies to develop guidelines and principles for social impact assessment, and management of fish and wildlife resources.

The Bureau of Indian affairs has worked with the EPA, IHS and HUD to perform studies to address major environmental and health related concerns as they appear in communities.

The National Park Service has done numerous partnership programs and studies with youth corps and conservation organizations regarding incidence of hazardous debris. Specifically, the Montana Conservation Corps worked with the Blackfeet tribe in a Continental divide trail reclamation project.

Although these studies enhance federal agency knowledge, they do little to provide states, like Montana, with useful data for further needs assessment for health issues.

Little information is available for other minority populations in Montana. Hutterites are an example of a hidden minority population in Montana. If existing data has suitable

parameters, this population could be tracked on the basis of religion. The following information was gathered about the Hutterite populations in Montana.

- 300,000 members nationwide and 43 colonies in Montana
- The State's second largest hidden minority
- Served primarily by community health nurses
- In a 2000 survey conducted by students at MSU-Billings, 150 surveys were distributed only 18 were returned. Personal interviews were conducted.
- This population has a great respect for doctors and nurses and conventional medicine, but use alternative medicine such as reflexology and massage, herbal remedies such as celery tea for colds and stinging nettle tea for "girl disorders" (MSU-Billings, 2000).

4.0 INDIVIDUAL AND FOCUS GROUP MEETINGS

4.1 CONTACT LETTER

During the project start-up period, a letter was distributed to potential focus group members at 17 different organizations. Additional letters were distributed after initial contacts were made. A copy of the letter and its distribution list are in Appendix E of this report.

4.2 FOCUS GROUP MEMBERS AND MEETING COORDINATION

A series of interviews and meetings were conducted, in person and via telephone, with tribal health directors, urban Indian clinic directors, migrant health directors, state and local public health agencies. Time constraints limited the size and diversity of these meetings and conversations. Primary information providers and/or group participants are listed in Table 4-1.

TABLE 4-1 PRIMARY INFORMATION PROVIDERS

SOURCE	AGENCY
JoAnn Dotson, Bureau Chief	Family and Community Health Bureau Health Policy and Services Division Department of Public Health and Human Services
Todd Harwell	Department of Public Health and Human Services
Vicki Peterson	Missoula Harm Reduction Center
Sharon Liederman, Director	Rural Employment Opportunities, Inc. (Helena, MT)
Phyllis Scharr	Salish Kootenai College (Pablo, MT)
Marcia Diaz	Wakina Sky Learning Circle and Library (Helena, MT)
Beth Sirr, FNP	Leo Pocha Clinic (Helena, MT)
Louise Olemashing Fischer	Wakina Sky Learning Circle and Library (Helena, MT)
Darren Bearshield Melton, Director	Helena Indian Alliance (Helena, MT)
Bonnie Lafontaine, RN	Leo Pocha Clinic (Helena, MT)
Julie Gardipee Chriske, MA, MHS, MAC, CCDC	Genesis Counseling Services (Helena, MT)

4.3 INDIVIDUAL AND FOCUS GROUP MEETINGS

Tribal health directors, urban Indian clinic directors, migrant health directors, state and local public health agency staff were asked, in person and by telephone, to provide input

regarding the data, how to access more accurate and complete data, and how the information should be used and communicated. Discussions were held with representatives from each tribal reservation and in communities with Native American urban health clinics/hospitals. Compiled information and data as well as input received from contacts on trends, consistencies, information gaps, and suggested communication improvements were the discussion topics. Comments and feedback from conversations and meetings with project contacts are presented in this section.

4.3.1 Comments and Feedback from Western Montana

The communities included in "Western Montana" for this project are Browning, Ronan, Pablo, St. Ignatius, Missoula, Butte, Helena, Bozeman, Great Falls, Fort Belknap, Havre, Harlow, Harlem, Box Elder and Poplar. Comments and feedback follow.

Communication

- Would like better communication with the State, but are unsure as to schematics.
- Several people stated that some state entities have a difficult time understanding that Indian people react to outside input differently, may take offense to state involvement, but are reluctant to be surveyed and studied.
- A consistent data tracking system would help Tribal Health obtain better accountability and increase effectiveness of expenditures.
- Some individuals stated that when there is an issue between the tribes and the State, contact by the State occurs after the fact. For example, a 4-E compact with the State foster care program was implemented a system without talking to the tribe.
- Several health care social workers and nurses discussed the 1-800 phone number for reporting child abuse. They stated that it will not and is not working in Indian Country because it is impersonal and confidentiality could be compromised.
- Some rural communities stated they feel state government does not take them seriously.

Existing Studies

- Some agencies participated in the 1998-99- Regional Differences in Indian Health.

- Some health agency's report participating in national studies and giving their data to BIA, IHS or the Indian Statistics Center in Phoenix, Arizona.
- One urban center said they have provided input in federal studies focusing on diabetes and HIV, but they feel they are not accepted by State government as an urban center despite serving members from 25 different tribes.
- Most research and studies done in Montana have been funded, organized and analyzed by state government.
- Center for Substance Abuse Treatment (CSAT) is a primary funding source for chemical use issues among Native American populations in Montana.
- Most community hospitals are not actively performing research of any kind.
- Rural Employment Opportunities, Inc. (REO) has contracted to participate in studies such as the National Cancer Institute, OSHA, National Migrant Councils and National Domestic Violence Organizations but the data is fed into large databases and is not retrievable the State. In Montana, REO did small studies regarding cancer incidents and accident incidents in migrant children.
- Helena's urban clinic enters diabetes information into the Montana Diabetes Project database, but does not perform other studies. Their staff cited Mr. Todd Harwell, DPHHS, as the State's diabetes statistics "guru".
- IHS centers, such as the Harlem Indian Hospital, report very good data collection as standard operating procedure.
- Tribal Health and IHS are two very different entities and do not always work together well.

Miscellaneous

- Report that student theses are difficult to publish due to the lack of primary data and inhibitive costs for obtaining solid scientific data of Montana's minorities.
- Most health care agencies stated that Governor Martz has been very active in communicating with tribes and other minorities.
- An urban center reported that community hospital emergency room visits nationally are up 59% from 2000 and that 54% of those persons are unable to pay for the services they receive.

- The Fort Belknap Service Unit at Harlem Indian Hospital discussed their appreciation to the CDC when a cluster TB case was discovered. They received "stop and drop" money to address the issue. It was suggested that the State develop such a linkage to expedite such funding in similar cases.

Issues

- Report that data gathering and storage systems are inconsistent and sometimes non-existent.
- Biggest issues being dealt with are alcohol, diabetes, heart disease and obesity.
- Several small communities health care persons state they need assistance with fluoridation programs in schools because of the high number of private wells in small communities.
- More satellite clinics are needed.
- Urban centers report seeing large increases in dental needs, a shortage of dental services and state the associated dental costs are absorbed by emergency rooms in community hospitals because preventative dental care is unavailable to all working poor, especially minorities.
- Several persons in urban centers stated they need medications, internists and surgical resources.
- Several people suggested a medical care voucher system for all working poor including minorities and state that the State Auditor's office should reduce the current list of 12 uninsurable diagnoses.
- IHS centers report the RPMS database system as "outstanding".
- Consistently, agencies are having difficulties finding dentists despite their ability to be covered under federal tot with regard to insurance and liability.
- Many care providers report they need satellite surgical centers to avoid having to transport critical patients.
- The Chippewa Cree report working on obtaining funds for dialysis needs.

4.3.2 Comments and Feedback from Eastern Montana

The communities included in "Eastern Montana" for this project are Harlowton, Lodge

Grass, Crow Agency, Lame Deer, Miles City and Wolf Point. In addition to Native Americans, this section also includes comments regarding migrant care, Hispanics and MSU-Billings Satellite. Comments and feedback follow.

Communication

- Suggest that the State could be less passive. State contact requires tribes and other minority health services to be proactive.
- Urban Indian Centers report little contact with state government, minimal access to health resources and clinic assistance.
- Report the need for centralized computer database such as IHS' RPMS system.
- IHS generally stated their communication with state government is satisfactory.
- Some facilities reported they would like more communication with other tribes to advise the State.

Existing Studies

- Published professional paper on diabetes and youth.
- Participated in National Cancer Institute Multi-tiered Project on Farm Laborers and Cancer. Migrant Health Services.
- Worked with the State on cardiovascular data entered into the Nation database.
- Presently putting together an oral care program, stationary and mobile, for adults. Original pilot project targeted children. Funded by the federal Department of Health and Human Services.
- Student Hutterite Study, MSU-Billings in May 2000.
- Urban centers report feeling lost and forgotten when compared to reservation sittings despite the high number of clients being served.
- A system similar to the RPMS system for data collection should be standardized by all minority health care organizations.
- A health needs outreach demonstration project for Hutterites is presently being conducted in Harlowton in connection with the Wheatland Memorial Hospital.

- Data collection system needs were repeatedly stated.

Issues

- Need dental providers.
- Suggested the State could make it easier for dentists to help by removing obstacles associated with licensure, malpractice, etc.
- Need funding for transportation.
- Urban centers report no time to write grants because of limited staff attending to patient care.
- Some health care programs state that the long distance required for travel to receive care impedes pro-active care and report more small satellite clinics are needed.
- Most facilities report needing additional funds for substance abuse, especially with regard to methamphetamine use.

Representatives at tribal colleges and one state university stated that student research suffered due to the lack of scientific statistical data regarding Montana's minority populations. In some instances, students were unable to specifically publish professional papers without secondary statistical data to compare against their hypothesis.

Some rural communities stated they feel state government does not take them seriously. Several comments were also made about when there is an issue between the tribes and the State, tribes feel they are contacted by the State occurs after the fact and not kept in the decision making process. Thus some programs are not working as intended because they did not have proper input from Indian Country.

5.0 TRENDS OR CONSISTENCIES IN INFORMATION

5.1 HEALTH STATUS TRENDS

According to the U.S. Census Bureau and the CDC's BRFSS, numerous racial disparities exist. Hispanics have the lowest prevalence of diabetes, yet the highest pregnancy related or gestational type of the disease. Black populations in Montana reported the highest incidence of diabetes and the lowest prevalence of gestational/pregnancy related type.

According to the BRFSS, more Non-Whites and Hispanics in Montana report to be in fair or poor health than Non-Hispanic Whites. They also report a much higher incidence of no health insurance, couldn't afford doctors, being overweight and obese, having more teeth removed, having high blood pressure, having high blood cholesterol, smoking and having diabetes. Non-Whites and Hispanics report fewer incidences than Non-Hispanic Whites of visits to the dentist, teeth cleanings, blood cholesterol checks, chronic drinking and using smokeless tobacco. Non-White and Hispanic females have Pap tests completed more routinely than Non-Hispanic White females, however, Non-White and Hispanic females report having much fewer clinical breast exams or mammograms. Both groups report similar rates of routine medical checkups, drinking and driving, blood pressure checks and binge drinking.

There is a tremendous need to reduce the prevalence of chemical dependency (alcohol, drug and tobacco) on Montana's Indian reservations and to satisfactorily address the constraints facing those seeking treatment (capacity and transportation) (CSAT, 2001).

The IHS Regional Differences in Indian Health study showed that Native Americans in Montana and Wyoming have a life expectancy at birth of 8 years less that the average of all Americans. It also showed a lower rate of income and of high school and college graduation for Native Americans and a much higher rate of unemployment and percentages living below the poverty level. Birth rates, high birth weight, numbers of mothers who smoked during pregnancy, numbers born to diabetic mothers and numbers of infants dieing from SIDS is also higher for Native Americans compared to other

Americans. Death rates for Native Americans in the IHS Billings Area are much higher than the average of all Americans in all areas examined except breast cancer, colon-rectal cancer and prostrate cancer and are lower in cervical cancer and HIV.

5.2 TRENDS IN PROJECT CONTACT COMMENTS

Three prevalent comments were mentioned across the State and in both urban and tribal areas. The first prevalent comment was the need for funding. The second comment prevalent comment from project contacts across the State was the need for dental care and providers. The third prevalent comment was travel and associated transportation expenses and time. Most contacts mentioned concern and need for funding associated with distances to medical care and the associated transportation time and expenses.

Several urban centers either seem to feel "out of the loop" or unappreciated or both. A standardized data collection system method was requested by several contacts.

All reservation health care personnel that Genesis spoke with or met were impressed with Governor Judy Martz's concern for tribal needs and issues. Many of them state they had met her personally and found her to be sincere and genuine. They reported that she is the first governor since governor Stan Stephens to visit all seven tribal reservations in Montana in her first year in office. (Conversations, 2001).

6.0 GAPS IN INFORMATION

Montana's vital statistics fertility and morbidity rates do not adequately separate populations of any minority grouping with the exception of Native Americans. Only certain data sets allow for sorting to segregate Native American data. Many break their statistics only into "White" or "Other" or into "Non-Hispanic White" or "Non-White or Hispanic". These limits do not all allow specific issues of minority health to be identified and targeted.

According to the U.S. Bureau and the CDC's BRFSS, the second highest prevalence of gestational/pregnancy related type of diabetes occurred among those populations that the CDC identifies as "other", which with their data includes Montana's largest minority group, Native Americans.

More data is needed to fully assess the health needs and status of Blacks in Montana. Because the Black population is so small, yet very significant, it is severely understudied with Montana's reporting systems. This same problem exists for Asian Americans and for Native Hawaiian and Pacific Islanders in Montana.

Other noted problems are:

- Statistics do not adequately reflect demographics or health needs of Montana`s smaller minorities, such as Hispanics, Asian Americans and African Americans.
- IHS compiles federal statistics but not Montana statistics.
- Many studies compile information, but send data and statistics to federal or funding agencies and it does not end up being reported to DPHHS or disseminated to minority populations.
- No central collector of information and statistics
- Office of vital statistics has information but it is not compiled to be useful
- No universal report for all minorities, must go to several sources
- Dissemination of data. It appears that pertinent reports are not always distributed to minority populations that could benefit from the information. Minority populations

need to receive all pertinent reports.

Many of the studies completed or participated in by health agencies, provided their data to national databases and the information was not readily available for examination for Montana statistics.

Montana does a fairly good job of tracking its Native American population's needs, largely through the efforts of DPHHS and the Indian Health Service. Data for urban Indians (i.e. those not on the reservations) is not as obtainable as data for those living on or near reservation trust lands. Further complicating clean and usable data is the fact that many Native Americans in Montana are landless or not enrolled. In the past self-identification as "Indian" by some tribes was based on enrollment in a specific band or nation. Additionally, a person can be enrolled at only one land base, thereby discounting other tribal blood quanta. No other minority is counted or analyzed based upon an attachment to a specific "clan".

7.0 COMMUNICATION PROCESS FOR PUBLIC HEALTH ACTIVITIES

A communication process for public health activities was investigated. Views on communication between minority agencies and state government were very polarized. Agencies either stated they felt communications were either satisfactory or very poor. The most frequent complaint reported was "the State makes changes or implements programs and tells us after the fact rather than consulting with us prior to program implementation" (reported by an eastern Montana Program Director).

Additionally, some project contacts reported that they had trouble understanding state policies and bureaucracy and felt like outsiders. The general impression is that minorities are not adequately represented in higher levels of state government. Communication improvements are further developed in the conclusions and recommendations section of this report.

Presently, Mr. G. Bruce Meyers and Ms. Lori Ryan act as the State's liaisons for Native American information and activities through the OIA. OIA does a superb job of disseminating information and coordinating activities within the State of Montana. Collection and dissemination of minority health issues, however, are very sizeable undertakings and health liaison tasks would undoubtedly require an additional staff position in DPHHS.

Most agencies Genesis contacted for this project referred us back to the State of Montana's DPHHS. There is a reliance on the State and Federal government to track data, offer funding for research and perform data analysis. At the same time however, many individuals felt frustration at perceived cultural insensitivity on the part of some government entities performing these studies. Many of the studies completed or participated in by health agencies, provided their data to national databases and the information was not readily available for examination for Montana statistics.

As is evidenced by the listing of existing reports, DPHHS has taken the lead on

completing and disseminating minority health information on a state level and IHS has the lead on the federal level. It still appears that much of the work to stay informed of minority health issues falls to the minority populations themselves. Native Americans are organized by tribes and though they are not always "in the loop" to the of health agencies within the State, they are far more organized and informed that other minority populations within the State. Other minority populations do not seem to have clearly designated contact persons or representatives within public health agencies.

The U.S. Census Bureau does an excellent job as an outside agency, but many minorities seem to be fearful and apprehensive regarding any government "surveys. Native Americans have learned to distrust the government through many years of struggle. Distrust may prevent complete and accurate data being collected.

8.0 CONCLUSIONS

Some of the agencies contacted had experienced significant staff turnover or reduction and information regarding past research was sometimes unavailable.

Urban center clinics serve large numbers of Native Americans, yet their record keeping, staff numbers and program availability are limited severely by lack of funding. In addition, urban centers rarely have administrative staff to identify funding sources and write grants. As is true for all medical providers across the State, patient care sometimes requires staff to work many uncompensated overtime hours, leaving little time to explore funding options. There is no standardized database system in place for Native American urban health centers to consistently use for reporting minority health data. Many of the urban centers contacted reported feeling lost and forgotten when compared to reservation sittings despite the high number of clients being served.

Despite the varied and many government agencies that have developed programs to help eliminate health status disparities among minorities in Montana, severe disparities continue to exist. Reduction of the prevalence of chemical dependency (alcohol, drug and tobacco) on Montana's Indian reservations needs to become a priority issue.

Some areas of Montana address the health needs of Native Americans much better than other areas of the State. Tribal reservations served by IHS units seem to have greater resources than do Urban Indian Centers. Urban Indian Centers assist large numbers of Native Americans from numerous tribes (e.g. one center reporting serving members from more than 25 different tribes). There is no standardized client and service tracking system for non-IHS facilities. The bulk of agencies contacted were not aware what, if any, studies were available on the health status of Native Americans in Montana. There seemed to be a distrust of anyone who was not from Indian Country who was asking a lot of questions and trying to get information for reporting purposes. Examples where given by several contacts about incidents where state health department personnel did not listen to them or did not ask and were not culturally sensitive when implementing programs.

The Indian Health Service (IHS) utilizes the Resource Personnel Management System (RPMS) to track clients. RPMS is a computer database system that allows input of data for all patients served at IHS centers. This type of database system would be useful for Native American urban health centers and provide consistency in reporting minority data.

Lead agency and minority population representatives and their respective contact persons must be clearly identified to insure proper collection and dissemination of information within Montana. The process seems to break down because, as yet, minority and agencies are not always clearly identified or informed.

9.0 RECOMMENDATIONS

Upon completion of an analysis of existing health studies, trends in data and data gaps, Genesis developed recommendations presented in this report on how information and program development can more effectively solicit and utilize input from minority populations. Information, feedback and ideas gathered while compiling information and during information review and analysis and focus group meetings were used as a basis for these recommendations.

The culmination of this project will likely result in future state and federal funding to provide Native Americans and other Montana minority populations with much needed holistic healthcare. Although this project mainly focused on Native Americans and migrant workers, it also includes references to Hispanics, Asians, African Americans and other hidden populations.

As a result of this project, the following recommendations are offered:

1. It is recommended that the State of Montana add a staff position to act as a conduit of information, coordinating health service statistics and continually analyzing data. Research initiative should be viewed as separate yet syncopated aspects of Montana's minority health care status. This new staff position in Montana state government could be responsible for gathering, monitoring and analyzing minority health data. Such a position, were it implemented, would work closely with the Native American Advisory Committee, community health programs, IHS, urban centers, Office of Minority Health and other partners. In addition, the position could act as a quality control person to avoid service duplication, help to locate funding for capacity building, and provide Training-of-Trainers (TOT) services to communities of minority concentration.

   Many state health departments rely on medical schools and teaching/research hospitals to obtain primary research information and data must be set into place to

obtain qualitative and quantitative primary information regarding Montana's minority health issues and patient needs. This same staff position could develop data tracking system specifically for Montana, eliminating total reliance on federal and out-of-state entities. In addition, the individual would work with the Office of Indian Affairs (OIA) and position Montana's DPHHS to disseminate information, analyze and coordinate minority health data for the State of Montana.

2. The State of Montana should apply for financial awards to assist in developing new research initiatives in order to benefit the health status of Montana's minorities. One resource for possible funding involves the "Agency for Healthcare Research and Quality (AHRQ) who funds health research in under-served minority populations. The Building Research Infrastructure and Capacity Program (BRIC) seeks to fund institutions in Idaho, Montana, Nevada, Utah and Wyoming. The BRIC Program's goal is to enhance the competitiveness for research funding among institutions located in states where successful applications for funding has been historically low. Good baseline information could be obtained from the 1995-1996 Public Health Improvement Task Force and the 1998 Montana Turning Point Initiative.

3. A consistent and somewhat standardized system of data collection, analysis, retrieval and dissemination should be implemented statewide, where possible. The Indian Health Service data/information tracking system, Resource Personnel Management System (RBMS), is a superb system that does not appear to compromise confidentiality and may allow deviation from present data input systems, where available, and provide more time for client care to providers. Urban centers should obtain similar systems to better streamline data systems and client care record keeping.

4. At least one representatives from Montana's DPHHS should attend the Montana-Wyoming Tribal Leaders Council meetings.

5. Existing studies completed by the State, as well as the few research projects completed by local agencies, seem to cover diabetes, substance abuse, breast cancer and other cancers and some cardiovascular diseases. The CDC's and DPHHS BRFSS likely works well in identifying prevalent behaviors as a method for determining health issues and strategic plans for dealing with those priority issues. However, it is not clear how effective this system is in monitoring minority needs. The strategic plans should be evaluated for effectiveness by monitoring identified prevalent behaviors.

6. Additional research is needed to assess and address the health needs of Hispanics, Asian Americans, African Americans and other hidden minorities. Little, or no, information was available for these subgroups in Montana. The above-mentioned Minority Health Statistician/Analyst position would allow for greater networking with agencies such as the NAACP, National Alliance for Hispanic Health, the Hesperian Foundation and other organizations focusing on the needs of minority populations.

   Quality assurance, accountability and accurate data are needed to adequately address health needs for Montana's minorities. This issue could be most cost effectively addressed by adding a minority health specialist staff position to the Montana state health department and by implementing standardized database systems to provide easy retrieval and analysis of data.

7. Locate and provide incentives to bring more minority health practitioners to Montana. Trust is very important when patients seek medical care. Medical providers serving minority populations must incorporate traditional practices of those specific populations into their western practices in order to form adequate bonds. When cultural beliefs are respected, individuals are more likely to feel comfortable being studied, surveyed and analyzed.

An example of needed consistency can be illustrated with Montana's Migrant farm workers population. Migrant farm worker demographics are not tracked by ethnicity, but by age, gender and agricultural work history.

8. Build comprehensive reports utilizing information collect by the Office of Vital statistic, BRFSS, etc. It appears that data collected by this agency that could be utilized to better assess the health status of minority populations if it is sorted and reported into more specific racial subgroups and locations.

9. Reduction of the prevalence of chemical dependency (alcohol, drug and tobacco) on Montana's Indian reservations needs to become a priority issue. Funding for treatment programs that address constraints of treatment facility capacity and location as well as transportation, childcare and aftercare facilities must be implemented.

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APPENDIX A

APPENDIX A

CENSUS DATA

CENSUS 2000 PUBLIC LAW 94-171 FILE
TOTAL POPULATION, RACE, HISPANIC OR LATINO ORIGIN, AND AGE 18 YEARS AND OVER
MONTANA

		RACE									
		ONE RACE									
COUNTY	Total Population	Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Age 18 Years and Over
Montana	902,195	886,465	817,229	2,692	56,068	4,691	470	5,315	15,730	18,081	672,133
Beaverhead County	9,202	9,093	8,821	17	134	17	4	100	109	246	6,942
Big Horn County	12,671	12,318	4,638	5	7,560	28	1	86	353	465	8,137
Blaine County	7,009	6,901	3,685	12	3,180	6	2	16	108	70	4,722
Broadwater County	4,385	4,341	4,255	12	51	5	3	15	44	58	3,280
Carbon County	9,552	9,457	9,272	24	65	34	0	62	95	169	7,259
Carter County	1,360	1,353	1,341	1	5	2	0	4	7	8	999
Cascade County	80,357	78,457	72,897	900	3,394	652	67	547	1,900	1,949	59,445
Chouteau County	5,970	5,927	5,015	5	873	14	6	14	43	40	4,249
Custer County	11,696	11,583	11,347	11	149	30	6	40	113	177	8,757
Daniels County	2,017	1,982	1,937	0	26	5	2	12	35	32	1,571
Dawson County	9,059	9,001	8,826	23	111	12	1	28	58	81	6,963
Deer Lodge County	9,417	9,263	9,028	16	167	34	1	17	154	155	7,295
Fallon County	2,837	2,824	2,797	4	9	10	1	3	13	11	2,113
Fergus County	11,893	11,755	11,548	10	140	23	0	34	138	96	8,974
Flathead County	74,471	73,353	71,689	113	856	346	44	305	1,118	1,061	55,184
Gallatin County	67,831	67,022	65,251	156	598	606	43	368	809	1,047	52,932
Garfield County	1,279	1,276	1,268	1	5	1	1	0	3	5	966
Glacier County	13,247	12,930	4,693	11	8,186	9	7	24	317	159	8,623
Golden Valley County	1,042	1,040	1,033	0	6	1	0	0	2	13	754
Granite County	2,830	2,778	2,724	0	36	4	1	13	52	36	2,144
Hill County	16,673	16,286	13,263	15	2,884	62	3	59	387	208	11,966
Jefferson County	10,049	9,882	9,654	14	127	42	7	38	167	149	7,251
Judith Basin County	2,329	2,309	2,297	1	8	2	0	1	20	13	1,705
Lake County	26,507	25,526	18,922	31	6,306	79	11	177	981	668	19,067
Lewis and Clark County	55,716	54,818	53,046	111	1,137	287	28	209	898	843	41,448
Liberty County	2,158	2,152	2,141	0	2	7	0	2	6	4	1,601
Lincoln County	18,837	18,487	18,100	21	226	59	7	74	350	271	14,065
McCone County	1,977	1,950	1,917	6	21	6	0	0	27	19	1,486
Madison County	6,851	6,756	6,647	3	36	18	0	52	95	130	5,281
Meagher County	1,932	1,913	1,878	0	20	3	1	11	19	29	1,449
Mineral County	3,884	3,787	3,673	8	75	20	1	10	97	61	2,942
Missoula County	95,802	94,016	90,073	261	2,193	978	80	431	1,786	1,543	73,885
Musselshell County	4,497	4,444	4,358	3	57	7	2	17	53	72	3,446
Park County	15,694	15,511	15,168	63	145	56	5	74	183	288	11,999
Petroleum County	493	491	489	0	1	0	0	1	2	6	365
Phillips County	4,601	4,505	4,115	7	350	15	1	17	96	53	3,345
Pondera County	6,424	6,329	5,374	6	929	9	3	8	95	54	4,524
Powder River County	1,858	1,849	1,810	0	33	2	0	4	9	11	1,364
Powell County	7,180	7,015	6,643	36	252	31	0	53	165	140	5,655
Prairie County	1,199	1,185	1,175	0	6	2	0	2	14	8	975
Ravalli County	36,070	35,552	34,883	49	319	108	35	158	518	678	26,839
Richland County	9,667	9,585	9,335	9	141	17	1	82	82	209	7,006
Roosevelt County	10,620	10,351	4,347	5	5,921	46	5	27	269	131	6,948
Rosebud County	9,383	9,194	6,043	22	3,041	27	0	61	189	219	6,240
Sanders County	10,227	9,957	9,400	13	485	31	1	27	270	159	7,794
Sheridan County	4,105	4,057	3,982	4	50	12	1	8	48	44	3,164
Silver Bow County	34,606	34,131	32,998	54	704	149	21	205	475	950	26,407
Stillwater County	8,195	8,098	7,934	11	57	17	2	77	97	165	6,124
Sweet Grass County	3,609	3,562	3,500	2	20	12	1	27	47	54	2,672
Teton County	6,445	6,350	6,207	12	98	6	0	27	95	73	4,688
Toole County	5,267	5,155	4,945	8	168	16	1	17	112	61	3,922
Treasure County	861	856	830	1	14	3	0	8	5	13	622
Valley County	7,675	7,538	6,765	10	723	19	1	20	137	60	5,747
Wheatland County	2,259	2,222	2,191	3	13	4	5	6	37	25	1,653
Wibaux County	1,068	1,059	1,047	2	5	2	0	3	9	4	792
Yellowstone County	129,352	126,933	120,014	580	3,950	698	57	1,634	2,419	4,788	96,387

* Persons of Hispanic origin may be of any race

Source: U.S. Census Bureau Released March 21, 2001
Compiled by: Census and Economic Information Center, Montana Department of Commerce (406) 444-2896

CENSUS 2000 PUBLIC LAW 94-171 FILE
TOTAL POPULATION, RACE, HISPANIC OR LATINO ORIGIN, AND AGE 18 YEARS AND OVER
MONTANA

RESERVATIONS	Total Population	RACE: ONE RACE: Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Age 18 Years and Over
Montana	902,195	886,465	817,229	2,692	56,068	4,691	470	5,315	15,730	18,081	672,133
Blackfeet Reservation and Off-Reservation Trust Land**	10,100	9,901	1,359	8	8,507	4	3	20	199	137	6,274
Crow Reservation and Off-Reservation Trust Land	6,894	6,757	1,551	1	5,165	7	0	33	137	191	4,296
Flathead Reservation	26,172	25,086	17,814	24	6,999	76	10	163	1,086	711	18,640
Fort Belknap Reservation and Off-Reservation Trust Land	2,959	2,936	136	4	2,790	1	2	3	23	31	1,733
Fort Peck Reservation and Off-Reservation Trust Land	10,321	10,086	3,622	4	6,391	44	5	20	235	123	6,629
Northern Cheyenne Reservation and Off-Reservation Trust Land	4,470	4,390	350	1	4,029	2	0	8	80	105	2,534
Rocky Boy's Reservation and Off-Reservation Trust Land	2,676	2,653	69	1	2,578	2	1	2	23	40	1,463
Turtle Mountain Reservation and Off-Reservation Trust Land, MT--ND--SD (part)***	24	24	24	0	0	0	0	0	0	0	17

*Notes: Persons of Hispanic origin may be of any race

** Off-reservation trust lands,along with reservation lands,constitute the territory over which American Indian tribes have primary governmental authority. Trust land is property associated with a specific American Indian reservation or tribe, held in trust by the federal government. Trust lands recognized in data tabulations are always "off-reservation", that is, they comprise all tribal and individual trust lands located outside of a reservation boundary. For more detailed information see Appendix A In the Public Law 94-171 Technical Documentation.

*** The Montana portion of the Turtle Mountain Reservation and Off-Reservation Trust Land is Trust Land spread over 13 counties. Only three counties have population in the them: Roosevelt (12), Sheridan (10), Daniels (2). The other counties are Blaine, Carter, Chouteau, Fergus, Hill, Liberty, McCone, Phillips, Richland, and Valley.

Compiled by: Census and Economic Information Center, Montana Department of Commerce (406) 444-2896 4/16/01

Source: U.S. Census Bureau Released March 21, 2001

CENSUS 2000 PUBLIC LAW 94-171 FILE
TOTAL POPULATION, RACE, HISPANIC OR LATINO ORIGIN, AND AGE 18 YEARS AND OVER
MONTANA

Places/CDPs**	County	Total Population	RACE: Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Age 18 Years and Over
			ONE RACE									
Montana		902,195	886,465	817,229	2,692	56,068	4,691	470	5,315	15,730	16,081	672,133
Absarokee CDP	Stillwater County	1,234	1,223	1,200	1	1	2	0	19	11	31	893
Agency CDP	Hill County	324	322	18	0	303	1	0	0	2	3	177
Alberton town	Mineral County	374	371	365	1	4	0	0	1	3	2	273
Alder CDP	Madison County	116	116	116	0	0	0	0	0	0	0	85
Amsterdam-Churchill CDP	Gallatin County	727	724	716	0	0	3	0	5	3	7	517
Anaconda-Deer Lodge County***	Deer Lodge County	9,417	9,263	9,028	16	167	34	1	17	154	155	7,295
Antelope CDP	Sheridan County	43	43	43	0	0	0	0	0	0	0	35
Arlee CDP	Lake County	602	581	276	0	301	0	0	4	21	31	407
Ashland CDP	Rosebud County	464	450	100	0	349	1	0	0	14	9	274
Augusta CDP	Lewis and Clark County	284	274	263	0	7	0	0	4	10	5	229
Avon CDP	Powell County	124	124	124	0	0	0	0	0	0	0	82
Azure CDP	Hill County	253	248	7	0	241	0	0	0	5	1	146
Balnville town	Roosevelt County	153	145	137	0	8	0	0	0	8	1	123
Baker city	Fallon County	1,695	1,684	1,663	4	9	5	1	2	11	4	1,241
Ballantine CDP	Yellowstone County	346	330	309	3	5	1	0	12	16	40	259
Basin CDP	Jefferson County	255	248	243	0	4	1	0	0	7	5	187
Bearcreek town	Carbon County	83	81	80	1	0	0	0	0	2	0	65
Beaver Creek CDP	Hill County	291	287	286	0	1	0	0	0	4	1	217
Belfry CDP	Carbon County	219	218	216	0	2	0	0	0	1	4	159
Belgrade city	Gallatin County	5,728	5,660	5,527	5	61	17	5	45	68	111	4,024
Belt city	Cascade County	633	622	601	9	9	0	2	1	11	7	465
Big Arm CDP	Lake County	131	131	91	0	40	0	0	0	0	0	105
Bigfork CDP	Flathead County	1,421	1,411	1,383	5	15	5	2	1	10	21	1,182
Big Sandy town	Chouteau County	703	695	670	0	20	0	1	4	8	5	551
Big Sky CDP	Gallatin & Madison Counties	1,221	1,215	1,196	1	4	8	1	5	6	25	1,034
Big Timber city	Sweet Grass County	1,650	1,625	1,594	0	13	5	1	12	25	28	1,259
Billings city	Yellowstone County	89,847	87,993	82,539	495	3,088	533	38	1,300	1,854	3,758	68,258
Birney CDP	Rosebud County	108	105	10	0	93	0	0	2	3	2	59
Black Eagle CDP	Cascade County	914	687	805	5	70	2	0	5	27	23	696
Boneau CDP	Chouteau County	190	190	5	0	185	0	0	0	0	1	83
Bonner-West Riverside CDP	Missoula County	1,693	1,653	1,598	4	40	1	0	10	40	29	1,255
Boulder town	Jefferson County	1,300	1,272	1,225	3	30	9	1	4	28	15	966
Box Elder CDP	Chouteau & Hill Counties	794	788	33	0	753	0	0	2	6	22	414
Bozeman city	Gallatin County	27,509	27,104	26,056	92	342	445	18	149	405	438	23,102
Bridger town	Carbon County	745	735	731	0	3	0	0	1	10	27	540
Broadus town	Powder River County	451	450	444	0	5	1	0	0	1	5	333
Broadview town	Yellowstone County	150	146	145	0	1	0	0	0	4	4	108
Brockton town	Roosevelt County	245	241	32	0	208	0	1	0	4	3	142
Browning town	Glacier County	1,065	1,036	70	1	964	0	0	1	29	20	730
Busby CDP	Big Horn County	695	667	44	0	622	0	0	1	28	23	374
Butte-Silver Bow (balance)***	Silver Bow County	33,892	33,421	32,325	53	675	147	21	200	471	927	25,875
Camp Three CDP	Musselshell County	138	136	132	0	2	2	0	0	2	1	122
Cardwell CDP	Jefferson County	40	40	39	0	0	0	0	1	0	1	31
Carter CDP	Choutaau County	62	82	82	0	0	0	0	0	0	0	54
Cascade town	Cascade County	819	812	799	3	10	0	0	0	7	6	573
Charlo CDP	Lake County	439	429	337	5	78	0	0	9	10	12	281
Chester town	Liberty County	871	867	860	0	2	5	0	0	4	0	691
Chinook city	Blaine County	1,386	1,364	1,266	5	88	1	0	4	22	8	1,059
Choteau city	Teton County	1,781	1,732	1,673	1	52	2	0	4	49	21	1,377
Circle town	McCone County	644	835	624	5	6	0	0	0	9	7	490
Clancy CDP	Jefferson County	1,406	1,382	1,353	2	13	8	0	6	24	28	1,036
Clinton CDP	Missoula County	549	538	526	2	9	1	0	0	11	2	382

Places/CDPs**	County	Total Population	RACE — ONE RACE — Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Age 18 Years and Over
Clyde Park town	Park County	310	310	310	0	0	0	0	0	0	1	237
Colstrip city	Rosebud County	2,346	2,265	1,969	16	265	3	0	12	81	74	1,539
Columbia Falls city	Flathead County	3,645	3,599	3,509	9	45	18	3	15	46	67	2,612
Columbus town	Stillwater County	1,748	1,719	1,689	4	22	2	0	2	29	28	1,281
Conrad city	Pondera County	2,753	2,716	2,636	3	63	5	3	6	37	26	2,028
Cooke City-Silver Gate CDP	Park County	140	139	137	1	1	0	0	0	1	0	128
Coram CDP	Flathead County	337	331	315	0	9	3	0	4	6	7	246
Corvallis CDP	Ravalli County	443	433	421	0	6	2	1	3	10	19	324
Crow Agency CDP	Big Horn County	1,552	1,544	58	0	1,485	1	0	0	8	18	908
Culbertson town	Roosevelt County	716	694	641	2	43	2	0	6	22	7	546
Custer CDP	Yellowstone County	145	141	139	0	0	0	0	2	4	2	114
Cut Bank city	Glacier County	3,105	2,999	2,563	1	420	7	4	4	106	28	2,220
Darby town	Ravalli County	710	684	643	1	23	0	0	17	26	25	481
Dayton CDP	Lake County	95	92	89	0	3	0	0	0	3	0	87
De Borgia CDP	Mineral County	69	66	66	0	0	0	0	0	3	0	61
Deer Lodge city	Powell County	3,421	3,351	3,273	1	35	21	0	21	70	63	2,557
Denton town	Fergus County	301	299	299	0	0	0	0	0	2	3	227
Dillon city	Beaverhead County	3,752	3,708	3,618	13	49	5	0	23	44	73	2,901
Dixon CDP	Sanders County	216	207	163	0	44	0	0	0	9	3	160
Dodson town	Phillips County	122	117	61	0	55	1	0	0	5	3	81
Drummond town	Granite County	318	313	307	0	5	0	0	1	5	3	227
Dutton town	Teton County	389	382	368	1	5	2	0	6	7	11	282
East Glacier Park Village CDP	Glacier County	396	383	172	1	205	0	0	5	13	3	269
East Helena town	Lewis and Clark County	1,642	1,619	1,555	3	51	1	0	9	23	30	1,228
East Missoula CDP	Missoula County	2,070	2,026	1,937	7	67	10	0	5	44	34	1,568
Ekalaka town	Carter County	410	408	406	0	2	0	0	0	2	2	321
Elliston CDP	Powell County	225	224	221	0	2	1	0	0	1	0	153
Elmo CDP	Lake County	143	142	45	0	97	0	0	0	1	3	99
Ennis town	Madison County	840	827	823	0	0	0	0	4	13	6	636
Eureka town	Lincoln County	1,017	1,005	984	0	13	2	0	6	12	15	768
Evaro CDP	Missoula County	329	305	157	0	147	0	1	0	24	33	221
Evergreen CDP	Flathead County	6,215	6,106	5,893	15	125	23	3	47	109	116	4,475
Fairfield town	Teton County	659	646	639	0	6	0	0	1	13	6	490
Fairview town	Richland County	709	697	684	0	6	0	0	7	12	17	514
Fallon CDP	Prairie County	138	137	136	0	1	0	0	0	1	0	114
Finley Point CDP	Lake County	493	472	399	0	69	1	0	3	21	6	401
Flaxville town	Daniels County	87	85	80	0	2	1	0	2	2	0	68
Florence CDP	Ravalli County	901	884	866	0	13	1	4	0	17	17	637
Forsyth city	Rosebud County	1,944	1,925	1,855	4	44	16	0	6	19	24	1,456
Fort Belknap Agency CDP	Blaine County	1,282	1,247	33	4	1,207	1	2	0	15	19	735
Fort Benton city	Chouteau County	1,594	1,581	1,557	3	9	6	0	6	13	9	1,199
Fortine CDP	Lincoln County	169	165	163	1	1	0	0	0	4	1	128
Fort Peck town	Valley County	240	236	231	0	5	0	0	0	4	0	171
Fort Shaw CDP	Cascade County	274	270	268	0	2	0	0	0	4	4	193
Fort Smith CDP	Big Horn County	122	122	79	0	40	0	0	3	0	6	80
Four Corners CDP	Gallatin County	1,828	1,811	1,781	3	10	9	3	5	17	18	1,407
Fox Lake CDP	Richland County	157	155	155	0	0	0	0	0	2	2	99
Frazer CDP	Valley County	452	451	32	0	418	0	0	1	1	2	264
Frenchtown CDP	Missoula County	883	871	849	0	14	1	0	7	12	16	580
Froid town	Roosevelt County	195	191	177	0	11	0	0	3	4	3	147
Fromberg town	Carbon County	486	484	448	0	2	1	0	33	2	36	339
Gardiner CDP	Park County	851	846	828	3	12	2	0	1	5	4	674
Garrison CDP	Powell County	112	108	103	0	5	0	0	0	4	2	89
Geraldine town	Chouteau County	284	283	283	0	0	0	0	0	1	3	199
Gildford CDP	Hill County	185	183	181	0	2	0	0	0	2	0	135
Glasgow city	Valley County	3,253	3,196	3,055	4	114	13	0	10	57	35	2,481
Glendive city	Dawson County	4,729	4,698	4,605	14	57	5	0	17	31	48	3,702
Grass Range town	Fergus County	149	149	149	0	0	0	0	0	0	0	117

Places/CDPs**	County	Total Population	RACE — ONE RACE: Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Age 18 Years and Over
Great Falls city	Cascade County	56,690	55,299	50,996	540	2,888	485	49	341	1,391	1,354	42,552
Greycliff CDP	Sweet Grass County	56	56	55	0	0	1	0	0	0	1	34
Hamilton city	Ravalli County	3,705	3,639	3,565	4	33	29	0	8	66	61	2,956
Hardin city	Big Horn County	3,384	3,227	2,107	4	1,069	12	0	35	157	187	2,336
Harlem city	Blaine County	848	812	446	2	361	2	0	1	36	14	599
Harlowton city	Wheatland County	1,062	1,043	1,031	0	8	2	0	2	19	21	840
Harrison CDP	Madison County	162	161	157	0	3	1	0	0	1	2	109
Havre city	Hill County	9,621	9,354	8,378	11	867	47	2	49	267	142	7,145
Havre North CDP	Hill County	973	947	858	1	83	1	0	4	26	7	725
Hays CDP	Blaine County	702	701	37	0	664	0	0	0	1	2	393
Heart Butte CDP	Pondera County	698	690	33	1	654	2	0	0	8	8	390
Helena city	Lewis and Clark County	25,780	25,351	24,434	59	541	201	18	98	429	430	20,002
Helena Valley Northeast CDP	Lewis and Clark County	2,122	2,107	2,074	2	26	1	0	4	15	19	1,571
Helena Valley Northwest CDP	Lewis and Clark County	2,082	2,064	2,000	2	37	15	1	9	18	30	1,469
Helena Valley Southeast CDP	Lewis and Clark County	7,141	6,970	6,684	19	204	27	1	35	171	138	4,687
Helena Valley West Central CDP	Lewis and Clark County	6,983	6,915	6,759	11	99	17	4	25	68	68	4,952
Helena West Side CDP	Lewis and Clark County	1,711	1,669	1,626	2	27	6	0	8	42	25	1,284
Heron CDP	Sanders County	149	147	141	0	5	1	0	0	2	0	103
Herron CDP	Hill County	100	98	95	0	3	0	0	0	2	0	83
Highwood CDP	Chouteau County	189	186	184	1	0	1	0	0	3	1	129
Hingham town	Hill County	157	155	152	0	3	0	0	0	2	0	114
Hobson city	Judith Basin County	244	244	242	0	2	0	0	0	0	1	184
Hot Springs town	Sanders County	531	512	451	1	53	1	0	6	19	19	434
Hungry Horse CDP	Flathead County	934	915	886	0	20	1	4	4	19	16	651
Huntley CDP	Yellowstone County	411	411	400	0	1	1	0	9	0	13	279
Hysham town	Treasure County	330	326	312	0	13	1	0	0	4	3	246
Inverness CDP	Hill County	103	103	102	0	1	0	0	0	0	0	72
Ismay town	Custer County	26	26	26	0	0	0	0	0	0	1	15
Jefferson City CDP	Jefferson County	295	293	282	0	6	4	0	1	2	1	220
Jette CDP	Lake County	267	255	244	0	10	0	0	1	12	8	204
Joliet town	Carbon County	575	570	558	3	3	5	0	1	5	8	442
Joplin CDP	Liberty County	210	210	209	0	0	0	0	1	0	4	163
Jordan town	Garfield County	364	361	359	1	0	0	1	0	3	5	283
Judith Gap city	Wheatland County	164	155	150	2	2	1	0	0	9	0	114
Kalispell city	Flathead County	14,223	13,987	13,632	40	174	79	6	56	236	220	10,811
Kerr CDP	Lake County	17	17	14	0	3	0	0	0	0	2	13
Kevin town	Toole County	178	177	158	0	10	2	1	6	1	10	128
Kicking Horse CDP	Lake County	80	77	38	0	37	0	0	2	3	1	53
Kings Point CDP	Lake County	169	161	144	0	14	3	0	0	8	2	153
Klein CDP	Musselshell County	188	187	179	0	6	0	2	0	1	2	147
Knife River CDP	Richland County	297	294	288	0	4	0	0	2	3	12	217
Kremlin CDP	Hill County	126	125	125	0	0	0	0	0	1	3	89
Lakeside CDP	Flathead County	1,679	1,669	1,644	1	12	7	0	5	10	18	1,292
Lame Deer CDP	Rosebud County	2,018	1,988	117	1	1,866	1	0	3	30	44	1,136
Laurel city	Yellowstone County	8,255	6,190	8,039	10	73	24	1	43	65	151	4,633
Lavina town	Golden Valley County	209	207	206	0	0	1	0	0	2	7	153
Lewistown city	Fergus County	5,813	5,725	5,811	4	82	20	0	8	88	42	4,445
Lewistown Heights CDP	Fergus County	365	362	345	6	5	0	0	6	3	6	259
Libby city	Lincoln County	2,826	2,575	2,508	4	33	16	0	14	51	32	1,995
Lima town	Beaverhead County	242	236	225	0	7	0	0	4	6	4	180
Lincoln CDP	Lewis and Clark County	1,100	1,070	1,047	0	21	2	0	0	30	8	824
Livingston city	Park County	6,851	6,767	8,604	21	67	34	0	41	84	148	5,295
Lockwood CDP	Yellowstone County	4,306	4,206	4,007	20	115	15	5	44	100	161	3,018
Lodge Grass town	Big Horn County	510	504	59	0	442	0	0	3	6	8	294
Lodge Pole CDP	Blaine County	214	212	5	0	207	0	0	0	2	0	117
Lolo CDP	Missoula County	3,388	3,329	3,276	8	30	8	0	7	59	35	2,328
Loma CDP	Chouteau County	92	92	90	0	2	0	0	0	0	0	66
Lonepine CDP	Sanders County	137	129	119	2	7	0	0	1	8	7	95

Places/CDPs**	County	Total Population	RACE — ONE RACE: Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Age 18 Years and Over
Malmstrom AFB CDP	Cascade County	4,544	4,369	3,780	299	27	106	7	150	175	356	2,870
Malta city	Phillips County	2,120	2,078	1,968	1	99	5	1	4	42	22	1,597
Manhattan town	Gallatin County	1,396	1,381	1,360	0	10	4	1	6	15	13	1,024
Martin City CDP	Flathead County	331	322	293	0	28	0	0	1	9	2	254
Medicine Lake town	Sheridan County	269	260	248	0	10	1	1	0	9	0	198
Melstone town	Musselshell County	136	134	130	0	1	1	0	2	2	2	101
Miles City city	Custer County	8,487	8,402	8,209	10	118	24	4	37	85	135	6,402
Missoula city	Missoula County	57,053	55,985	53,387	207	1,341	703	57	290	1,068	1,004	45,798
Montana City CDP	Jefferson County	2,094	2,074	2,056	1	10	2	3	2	20	23	1,447
Moore town	Fergus County	186	186	184	0	2	0	0	0	0	0	142
Muddy CDP	Big Horn County	627	625	34	0	591	0	0	0	2	19	336
Musselshell CDP	Musselshell County	60	60	60	0	0	0	0	0	0	0	50
Nashua town	Valley County	325	320	299	1	18	1	0	1	5	7	277
Neihart town	Cascade County	91	87	85	0	1	0	0	1	4	1	75
Niarada CDP	Flathead, Lake & Sanders Counties	50	46	28	0	17	0	0	1	4	2	35
North Browning CDP	Glacier County	2,200	2,169	102	1	2,062	1	3	0	31	27	1,348
Noxon CDP	Sanders County	230	225	224	0	1	0	0	0	5	1	176
Old Agency CDP	Sanders County	95	90	15	0	75	0	0	0	5	1	60
Opheim town	Valley County	111	110	110	0	0	0	0	0	1	0	92
Orchard Homes CDP	Missoula County	5,199	5,134	4,957	7	70	67	6	27	65	70	3,941
Outlook town	Sheridan County	82	81	78	0	3	0	0	0	1	2	59
Ovando CDP	Powell County	71	69	69	0	0	0	0	0	2	0	56
Pablo CDP	Lake County	1,814	1,735	788	3	928	2	1	13	79	60	1,115
Paradise CDP	Sanders County	184	179	176	0	1	0	0	2	5	2	138
Park City CDP	Stillwater County	870	859	842	2	5	1	0	9	11	10	632
Parker School CDP	Chouteau & Hill Counties	352	352	7	0	344	0	1	0	0	6	186
Philipsburg town	Granite County	914	896	869	0	12	4	0	11	18	21	698
Pinesdale town	Ravalli County	742	726	725	0	1	0	0	0	16	22	299
Plains town	Sanders County	1,126	1,103	1,080	1	14	4	0	4	23	33	840
Plentywood city	Sheridan County	2,061	2,038	2,002	3	20	9	0	4	23	23	1,581
Plevna town	Fallon County	138	138	135	0	0	3	0	0	0	2	104
Polson city	Lake County	4,041	3,859	3,162	6	651	19	3	18	182	91	3,007
Poplar city	Roosevelt County	911	883	293	1	580	7	0	2	28	8	631
Power CDP	Teton County	171	168	166	0	2	0	0	0	3	1	119
Pryor CDP	Big Horn County	628	613	79	0	533	1	0	0	15	8	380
Radersburg CDP	Broadwater County	70	70	70	0	0	0	0	0	0	0	62
Ravalli CDP	Lake County	119	118	85	0	33	0	0	0	1	8	86
Red Lodge city	Carbon County	2,177	2,146	2,093	9	24	10	0	10	31	43	1,738
Reed Point CDP	Stillwater County	185	177	174	0	3	0	0	0	8	7	135
Reserve CDP	Sheridan County	37	37	36	0	1	0	0	0	0	1	30
Rexford town	Lincoln County	151	147	131	0	12	0	0	4	4	5	124
Richey town	Dawson County	189	187	187	0	0	0	0	0	2	2	154
Riverbend CDP	Mineral County	442	425	403	1	20	1	0	0	17	6	345
Rocky Point CDP	Lake County	107	103	102	0	1	0	0	0	4	0	84
Rollins CDP	Lake County	183	181	180	0	1	0	0	0	2	0	155
Ronan city	Lake County	1,812	1,743	1,131	2	599	2	1	8	69	61	1,283
Roundup city	Musselshell County	1,931	1,903	1,874	3	15	2	0	9	28	53	1,448
Rudyard CDP	Hill County	275	272	270	0	2	0	0	0	3	1	204
Ryegate town	Golden Valley County	268	268	264	0	4	0	0	0	0	4	209
Saco town	Phillips County	224	220	216	0	4	0	0	0	4	0	171
Saddle Butte CDP	Hill County	138	137	134	0	1	1	0	1	1	7	96
St. Ignatius town	Lake County	788	770	414	0	352	1	1	2	18	33	535
St. Marie CDP	Valley County	183	181	171	4	5	1	0	0	2	1	156
St. Pierre CDP	Hill County	289	288	5	1	282	0	0	0	1	1	177
St. Regis CDP	Mineral County	315	311	302	0	8	1	0	0	4	8	229
St. Xavier CDP	Big Horn County	87	66	26	0	35	0	0	5	1	15	45
Sangrey CDP	Hill County	263	255	2	0	252	1	0	0	8	6	151
Scobey city	Daniels County	1,082	1,058	1,036	0	8	4	0	10	24	27	855

Places/CDPs**	County	Total Population	RACE — ONE RACE: Total One Race	White	Black or African American	American Indian or Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Some Other Race	Two or More Races	Hispanic or Latino Origin*	Total Population Ages 18 Years and Over
Seeley Lake CDP	Missoula County	1,436	1,424	1,392	1	21	3	0	7	12	21	1,073
Shelby city	Toole County	3,216	3,137	2,974	8	134	13	0	8	79	40	2,444
Shepherd CDP	Yellowstone County	193	190	182	0	8	0	0	0	3	1	128
Sheridan town	Madison County	659	646	627	1	7	0	0	11	13	11	524
Sidney city	Richland County	4,774	4,732	4,574	5	90	15	0	48	42	116	3,501
Simms CDP	Cascade County	373	366	343	0	18	3	0	2	7	6	272
Somers CDP	Flathead County	556	548	534	2	6	0	0	6	8	22	425
South Browning CDP	Glacier County	1,677	1,635	41	2	1,583	0	0	9	42	36	953
Stanford town	Judith Basin County	454	451	448	1	2	0	0	0	3	2	345
Starr School CDP	Glacier County	248	247	6	0	241	0	0	0	1	0	143
Stevensville town	Ravalli County	1,553	1,528	1,499	4	16	4	0	5	25	31	1,160
Sunburst town	Toole County	415	410	395	0	15	0	0	0	5	3	291
Sun Prairie CDP	Cascade County	1,772	1,727	1,623	8	81	13	0	2	45	27	1,223
Sun River CDP	Cascade County	131	130	127	0	3	0	0	0	1	0	97
Superior town	Mineral County	893	864	829	1	26	7	0	1	29	17	667
Terry town	Prairie County	611	601	596	0	2	2	0	1	10	6	506
Thompson Falls city	Sanders County	1,321	1,303	1,278	3	19	2	0	1	18	13	989
Three Forks city	Gallatin County	1,728	1,718	1,686	0	19	3	4	6	10	23	1,238
Toston CDP	Broadwater County	105	100	99	0	1	0	0	0	5	0	78
Townsend city	Broadwater County	1,867	1,858	1,822	2	26	0	0	8	9	33	1,424
Trout Creek CDP	Sanders County	261	250	245	0	5	0	0	0	11	5	193
Troy city	Lincoln County	957	933	917	0	10	1	0	5	24	13	687
Turtle Lake CDP	Lake County	194	188	15	0	173	0	0	0	6	6	103
Twin Bridges town	Madison County	400	392	391	0	0	1	0	0	8	2	299
Ulm CDP	Cascade County	750	745	735	0	7	1	0	2	5	8	512
Valier town	Pondera County	498	485	459	0	26	0	0	0	13	6	376
Vaughn CDP	Cascade County	701	679	650	7	15	5	1	1	22	10	477
Victor CDP	Ravalli County	859	847	826	1	13	0	1	6	12	22	608
Virginia City town	Madison County	130	127	123	0	3	0	0	1	3	1	111
Walkerville town	Silver Bow County	714	710	673	1	29	2	0	5	4	23	532
Westby town	Sheridan County	172	171	169	0	2	0	0	0	1	3	146
West Glendive CDP	Dawson County	1,833	1,820	1,795	5	6	6	1	7	13	16	1,362
West Havre CDP	Hill County	284	270	262	0	4	4	0	0	14	0	194
West Yellowstone town	Gallatin County	1,177	1,162	1,082	4	10	9	0	57	15	91	913
Whitefish city	Flathead County	5,032	4,960	4,829	7	56	29	3	36	72	97	3,946
Whitehall town	Jefferson County	1,044	1,018	987	0	26	3	1	1	26	18	781
White Sulphur Springs city	Meagher County	984	969	947	0	14	2	1	5	15	19	764
Wibaux town	Wibaux County	567	562	556	2	3	0	0	1	5	4	436
Willow Creek CDP	Gallatin County	209	204	193	0	0	2	1	8	5	11	143
Wilsall CDP	Park County	237	237	226	0	4	0	0	7	0	7	181
Winifred town	Fergus County	156	154	151	0	2	0	0	1	2	3	120
Winnett town	Petroleum County	185	184	184	0	0	0	0	0	1	0	141
Winston CDP	Broadwater County	73	72	70	0	1	1	0	0	1	0	51
Wisdom CDP	Beaverhead County	114	114	110	0	2	0	0	2	0	2	100
Wolf Point city	Roosevelt County	2,663	2,600	1,484	1	1,079	27	0	9	63	43	1,837
Woods Bay CDP	Lake County	748	735	715	1	3	3	0	13	13	24	581
Worden CDP	Yellowstone County	506	498	487	3	5	1	0	2	8	18	377
Wye CDP	Missoula County	381	360	353	0	7	0	0	0	21	6	243
Wyola CDP	Big Horn County	186	182	35	0	147	0	0	0	4	4	109

* Persons of Hispanic origin may be of any race

** Census designated places (CDPs) are delineated for each decennial census as the statistical counterparts of incorporated places. CDPs are delineated to provide data for settled concentrations of population that are identifiable by name but are not legally incorporated under the laws of the state in which they are located. The boundaries usually are defined in cooperation with local and tribal officials. These boundaries, which usually coincide with visible features or the boundary of an adjacent incorporated place or other legal entity boundary, have no legal status, nor do these places have officials elected to serve traditional municipal functions.

*** Consolidated City/County

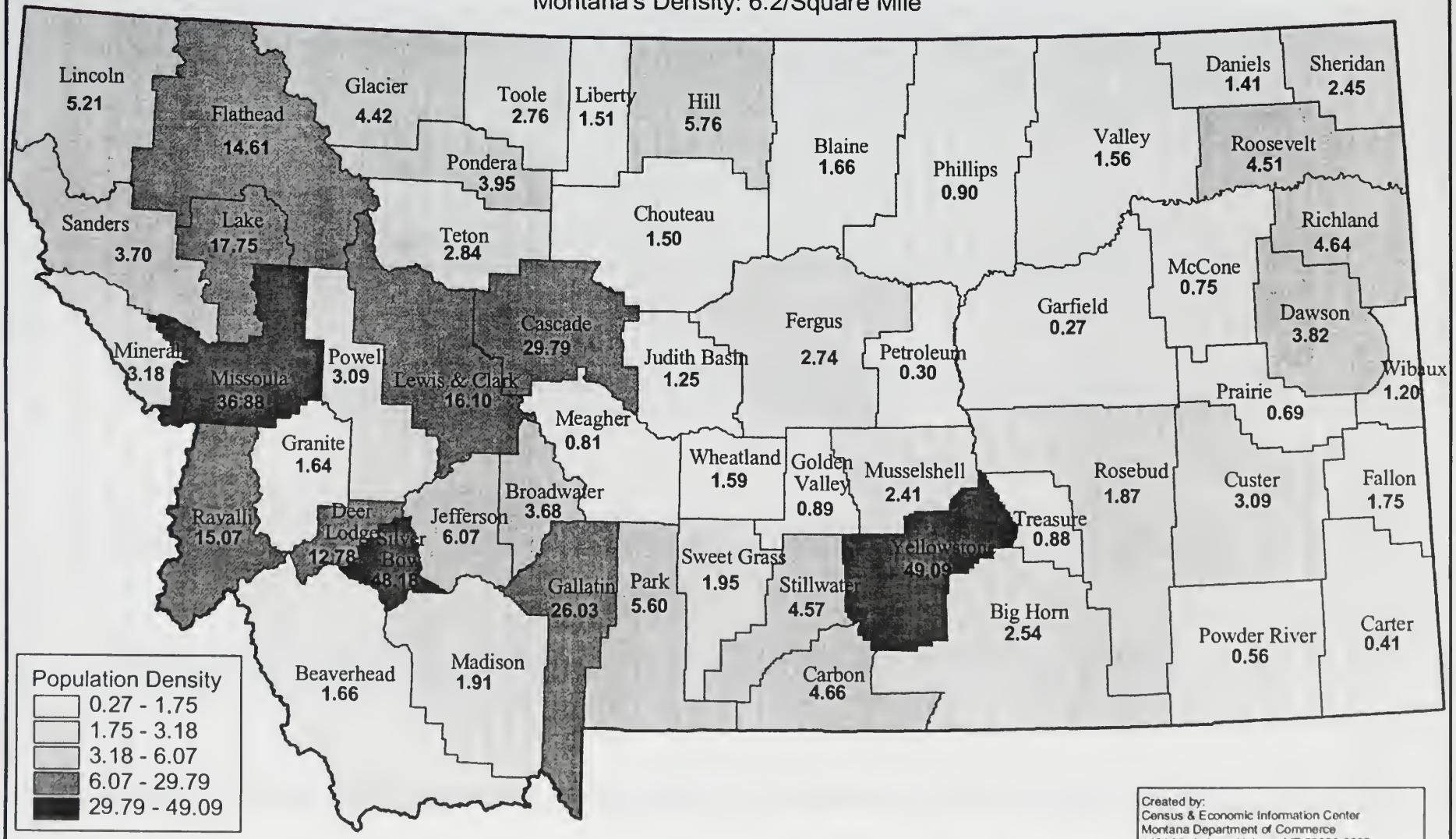
Source: U.S. Census Bureau Released March 21, 2001

Compiled by: Census and Economic Information Center, Montana Department of Commerce (406) 444-2896

Montana County Population

Population Density 2000

Montana's Density: 6.2/Square Mile



Source: U.S. Bureau of the Census, Public Law 94-171 data. March 2001.

March 21, 2001

Created by:
Census & Economic Information Center
Montana Department of Commerce
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http://ceic.commerce.state.mt.us

census 2000.apr

Census 2000 Public Law 94-171 File				
Total Population, Population Density, and Land Area for Montana Counties				
	TOTAL POPULATION	POPULATION DENSITY*	LAND AREA SQ. MILES	LAND AREA RANK
Montana	902,195	6.20	145,552.45	...
Beaverhead County	9,202	1.66	5542.31	1
Big Horn County	12,671	2.54	4994.81	5
Blaine County	7,009	1.66	4226.18	9
Broadwater County	4,385	3.68	1191.35	51
Carbon County	9,552	4.66	2047.99	33
Carter County	1,360	0.41	3339.57	15
Cascade County	80,357	29.79	2697.90	21
Chouteau County	5,970	1.50	3973.24	10
Custer County	11,696	3.09	3783.13	11
Daniels County	2,017	1.41	1426.09	48
Dawson County	9,059	3.82	2373.14	28
Deer Lodge County	9,417	12.78	736.98	55
Fallon County	2,837	1.75	1620.33	45
Fergus County	11,893	2.74	4339.17	8
Flathead County	74,471	14.61	5098.34	3
Gallatin County	67,831	26.03	2605.84	24
Garfield County	1,279	0.27	4668.06	7
Glacier County	13,247	4.42	2994.72	17
Golden Valley County	1,042	0.89	1175.30	52
Granite County	2,830	1.64	1727.44	40
Hill County	16,673	5.76	2896.36	18
Jefferson County	10,049	6.07	1656.64	42
Judith Basin County	2,329	1.25	1869.85	35
Lake County	26,507	17.75	1493.77	46
Lewis and Clark County	55,716	16.10	3460.96	14
Liberty County	2,158	1.51	1429.76	47
Lincoln County	18,837	5.21	3612.67	12
Madison County	6,851	1.91	3586.54	13
McCone County	1,977	0.75	2642.53	22
Meagher County	1,932	0.81	2391.82	27
Mineral County	3,884	3.18	1219.82	50
Missoula County	95,802	36.88	2597.97	25
Musselshell County	4,497	2.41	1867.15	36
Park County++	15,694	5.60	2802.41	19
Petroleum County	493	0.30	1653.90	43
Phillips County	4,601	0.90	5139.57	2
Pondera County	6,424	3.95	1624.70	44
Powder River County	1,858	0.56	3297.18	16
Powell County	7,180	3.09	2325.94	30
Prairie County	1,199	0.69	1736.55	39
Ravalli County	36,070	15.07	2394.21	26
Richland County	9,667	4.64	2084.09	32
Roosevelt County	10,620	4.51	2355.60	29
Rosebud County	9,383	1.87	5012.37	4
Sanders County	10,227	3.70	2762.17	20
Sheridan County	4,105	2.45	1676.58	41
Silver Bow County	34,606	48.18	718.31	56
Stillwater County	8,195	4.57	1795.09	38
Sweet Grass County	3,609	1.95	1855.08	37
Teton County	6,445	2.84	2272.61	31
Toole County	5,267	2.76	1910.95	34
Treasure County	861	0.88	978.86	53
Valley County	7,675	1.56	4921.00	6
Wheatland County	2,259	1.59	1423.09	49
Wibaux County	1,068	1.20	889.31	54
Yellowstone County	129,352	49.09	2635.15	23

* Population density equals total persons divided by land area in square miles.

Source: U.S. Census Bureau, Released March 21, 2001

Compiled by: Census and Economic Information Center, Montana Dept. of Commerce (406) 444-2896

CENSUS 2000 PUBLIC LAW 94-171 File
Total Population, Population Density, and Land Area for Montana Reservations

	TOTAL POPULATION	POPULATION DENSITY*	LAND AREA SQ. MILES
Montana	902,195	6.20	145,552.45
Blackfeet Reservation and Off-Reservation Trust Land**	10,100	4.26	2,371.44
Crow Reservation and Off-Reservation Trust Land	6,894	1.92	3,593.56
Flathead Reservation	26,172	13.50	1,938.09
Fort Belknap Reservation and Off-Reservation Trust Land	2,959	2.92	1,014.06
Fort Peck Reservation and Off-Reservation Trust Land	10,321	3.14	3,289.39
Northern Cheyenne Reservation and Off-Reservation Trust Land	4,470	6.33	705.94
Rocky Boy's Reservation and Off-Reservation Trust Land	2,676	15.61	171.42
Turtle Mountain Reservation and Off-Reservation Trust Land, MT--ND--SD (part)***	24	--	--

* Population density equals total persons divided by land area in square miles.

** Off-reservation trust lands, along with reservation lands, constitute the territory over which American Indian tribes have primary governmental authority. Trust land is property associated with a specific American Indian reservation or tribe, held in trust by the federal government. Trust lands recognized in data tabulations are always "off-reservation", that is, they comprise all tribal and individual trust lands located outside of a reservation boundary. For more detailed information see Appendix A in the Public Law 94-171 Technical Documentation.

*** The Montana portion of the Turtle Mountain Reservation and Off-Reservation Trust Land is Trust Land spread over 13 counties. Only three counties have population in them: Roosevelt (12), Sheridan (10), Daniels (2). The other counties are Blaine, Carter, Chouteau, Fergus, Hill, Liberty, McCone, Phillips, Richland, and Valley.

-- Not available

Compiled by: Census and Economic Information Center, Montana Dept. of Commerce, (406) 444-2896 4/16/01

Source: U.S. Census Bureau Released March 21, 2001

U.S. Census Bureau American FactFinder

DP-1. **Profile of General Demographic Characteristics: 2000**
Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data
Geographic Area: **Montana**

NOTE: For information on confidentiality protection, nonsampling error, and definitions, see http://factfinder.census.gov/home/en/datanotes/expsf1u.htm

Subject	Number	Percent
Total population	902,195	100.0
SEX AND AGE		
Male	449,480	49.8
Female	452,715	50.2
Under 5 years	54,869	6.1
5 to 9 years	61,963	6.9
10 to 14 years	69,298	7.7
15 to 19 years	71,310	7.9
20 to 24 years	58,379	6.5
25 to 34 years	103,279	11.4
35 to 44 years	141,941	15.7
45 to 54 years	135,088	15.0
55 to 59 years	47,174	5.2
60 to 64 years	37,945	4.2
65 to 74 years	62,519	6.9
75 to 84 years	43,093	4.8
85 years and over	15,337	1.7
Median age (years)	37.5	(X)
18 years and over	672,133	74.5
Male	331,235	36.7
Female	340,898	37.8
21 years and over	631,866	70.0
62 years and over	142,988	15.8
65 years and over	120,949	13.4
Male	52,942	5.9
Female	68,007	7.5
RACE		
One race	886,465	98.3
White	817,229	90.6
Black or African American	2,692	0.3
American Indian and Alaska Native	56,068	6.2
Asian	4,691	0.5
Asian Indian	379	0.0
Chinese	827	0.1
Filipino	859	0.1
Japanese	885	0.1
Korean	833	0.1
Vietnamese	199	0.0
Other Asian [1]	709	0.1
Native Hawaiian and Other Pacific Islander	470	0.1
Native Hawaiian	217	0.0
Guamanian or Chamorro	73	0.0
Samoan	72	0.0
Other Pacific Islander [2]	108	0.0
Some other race	5,315	0.6
Two or more races	15,730	1.7

Subject	Number	Percent
Race alone or in combination with one or more other races		
White	831,978	92.2
Black or African American	4,441	0.5
American Indian and Alaska Native	66,320	7.4
Asian	7,101	0.8
Native Hawaiian and Other Pacific Islander	1,077	0.1
Some other race	7,834	0.9
HISPANIC OR LATINO AND RACE		
Total population	**902,195**	**100.0**
Hispanic or Latino (of any race)	18,081	2.0
Mexican	11,735	1.3
Puerto Rican	931	0.1
Cuban	285	0.0
Other Hispanic or Latino	5,130	0.6
Not Hispanic or Latino	884,114	98.0
White alone	807,823	89.5
RELATIONSHIP		
Total population	**902,195**	**100.0**
In households	877,433	97.3
Householder	358,667	39.8
Spouse	192,067	21.3
Child	254,549	28.2
Own child under 18 years	211,642	23.5
Other relatives	26,425	2.9
Under 18 years	11,907	1.3
Nonrelatives	45,725	5.1
Unmarried partner	17,941	2.0
In group quarters	24,762	2.7
Institutionalized population	12,068	1.3
Noninstitutionalized population	12,694	1.4
HOUSEHOLDS BY TYPE		
Total households	**358,667**	**100.0**
Family households (families)	237,407	66.2
With own children under 18 years	111,807	31.2
Married-couple family	192,067	53.6
With own children under 18 years	82,384	23.0
Female householder, no husband present	32,016	8.9
With own children under 18 years	21,201	5.9
Nonfamily households	121,260	33.8
Householder living alone	98,422	27.4
Householder 65 years and over	35,991	10.0
Households with individuals under 18 years	119,550	33.3
Households with individuals 65 years and over	83,982	23.4
Average household size	2.45	(X)
Average family size	2.99	(X)
HOUSING OCCUPANCY		
Total housing units	**412,633**	**100.0**
Occupied housing units	358,667	86.9
Vacant housing units	53,966	13.1
For seasonal, recreational, or occasional use	24,213	5.9
Homeowner vacancy rate (percent)	2.2	(X)
Rental vacancy rate (percent)	7.6	(X)
HOUSING TENURE		
Occupied housing units	**358,667**	**100.0**
Owner-occupied housing units	247,723	69.1

Subject	Number	Percent
Renter-occupied housing units	110,944	30.9
Average household size of owner-occupied unit	2.55	(X)
Average household size of renter-occupied unit	2.22	(X)

(X) Not applicable
[1] Other Asian alone, or two or more Asian categories.
[2] Other Pacific Islander alone, or two or more Native Hawaiian and Other Pacific Islander categories.
[3] In combination with one or more other races listed. The six numbers may add to more than the total population and the six percentages may add to more than 100 percent because individuals may report more than one race.
Source: U.S. Census Bureau, Census 2000 Summary File 1, Matrices P1, P3, P4, P8, P9, P12, P13, P17, P18, P19, P20, P23, P27, P28, P33, PCT5, PCT8, PCT11, PCT15, H1, H3, H4, H5, H11, and H12.

Back to Basic Facts

Quick Tables

QT-PL. Race, Hispanic or Latino, and Age: 2000
Data Set: Census 2000 Redistricting Data (Public Law 94-171) Summary File
Geographic Area: **Montana**

NOTE: For information on confidentiality protection, nonsampling error, and definitions, see http://factfinder.census.gov/home/en/datanotes/expplu.html.

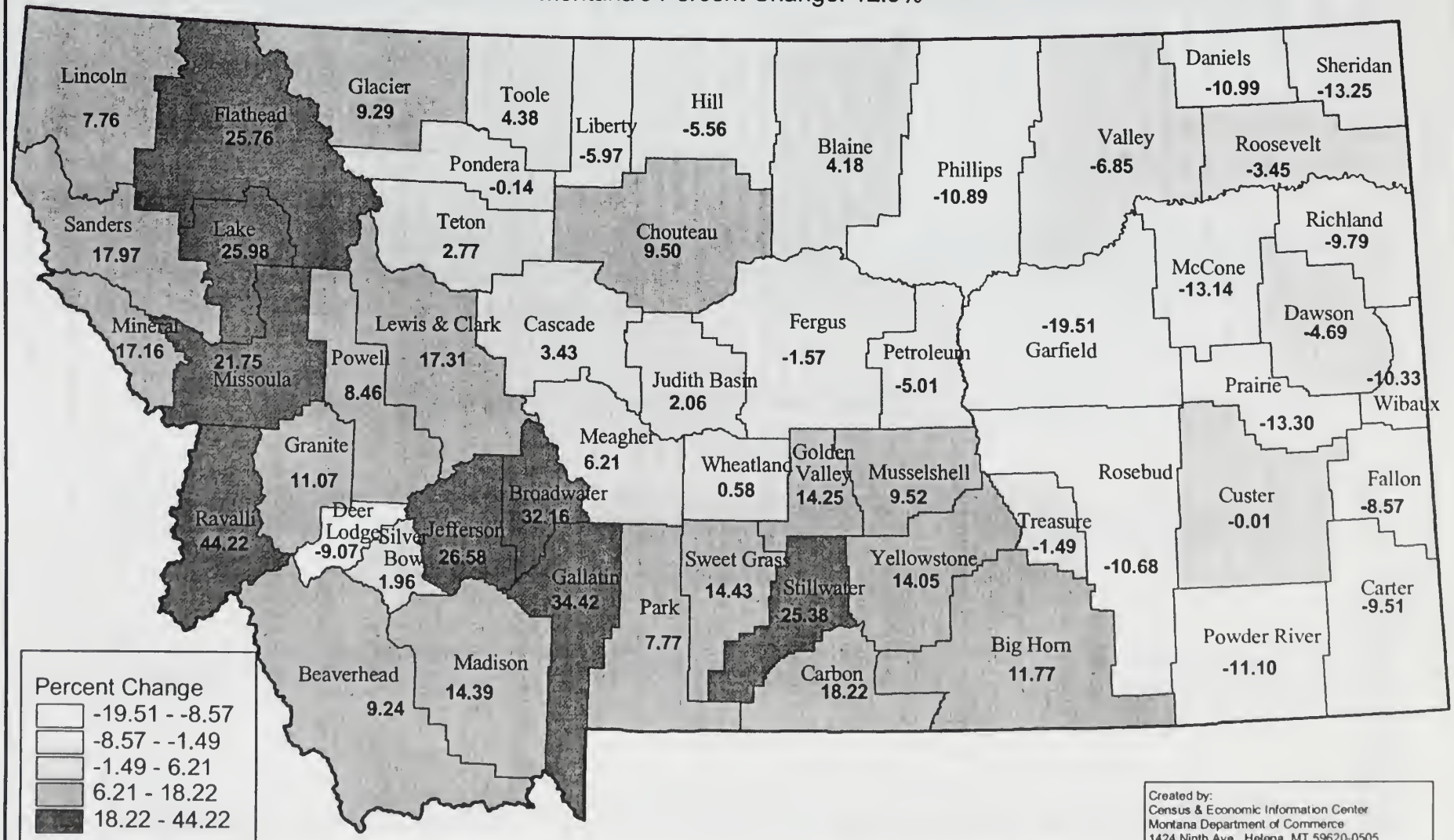
Subject	All ages		18 years and over	
	Number	Percent	Number	Percent
RACE				
Total population	**902,195**	**100.0**	**672,133**	**100.0**
One race	886,465	98.3	663,517	98.7
White	817,229	90.6	620,530	92.3
Black or African American	2,692	0.3	1,770	0.3
American Indian and Alaska Native	56,068	6.2	33,986	5.1
Asian	4,691	0.5	3,399	0.5
Native Hawaiian and Other Pacific Islander	470	0.1	341	0.1
Some other race	5,315	0.6	3,491	0.5
Two or more races	15,730	1.7	8,616	1.3
HISPANIC OR LATINO AND RACE				
Total population	**902,195**	**100.0**	**672,133**	**100.0**
Hispanic or Latino (of any race)	18,081	2.0	10,731	1.6
Not Hispanic or Latino	884,114	98.0	661,402	98.4
One race	870,346	96.5	653,599	97.2
White	807,823	89.5	614,700	91.5
Black or African American	2,534	0.3	1,683	0.3
American Indian and Alaska Native	54,426	6.0	33,204	4.9
Asian	4,569	0.5	3,327	0.5
Native Hawaiian and Other Pacific Islander	425	0.0	308	0.0
Some other race	569	0.1	377	0.1
Two or more races	13,768	1.5	7,803	1.2

(X) Not applicable
Source: U.S. Census Bureau, Census 2000 Redistricting Data (Public Law 94-171) Summary File, Matrices PL1, PL2, PL3, and PL4.

Montana County Population

Percent Change 1990 to 2000

Montana's Percent Change: 12.9%



Source: U.S. Bureau of the Census, Public Law 94-171 data. March 2001.

Montana County Decennial Census Resident Population: 1990 and 2000

COUNTY	2000 CENSUS	2000 CENSUS RANK	1990 CENSUS	Numeric Change 1990 - 2000	Percent Change 1990 - 2000
Montana	902,195	...	799,065	103,130	12.91
Beaverhead	9,202	24	8,424	778	9.24
Big Horn	12,671	14	11,337	1,334	11.77
Blaine	7,009	29	6,728	281	4.18
Broadwater	4,385	37	3,318	1,067	32.16
Carbon	9,552	21	8,080	1,472	18.22
Carter	1,360	50	1,503	-143	-9.51
Cascade	80,357	3	77,691	2,666	3.43
Chouteau	5,970	33	5,452	518	9.50
Custer	11,696	16	11,697	-1	-0.01
Daniels	2,017	46	2,266	-249	-10.99
Dawson	9,059	25	9,505	-446	-4.69
Deer Lodge	9,417	22	10,356	-939	-9.07
Fallon	2,837	41	3,103	-266	-8.57
Fergus	11,893	15	12,083	-190	-1.57
Flathead	74,471	4	59,218	15,253	25.76
Gallatin*	67,831	5	50,463	17,368	34.42
Garfield	1,279	51	1,589	-310	-19.51
Glacier	13,247	13	12,121	1,126	9.29
Golden Valley	1,042	54	912	130	14.25
Granite	2,830	42	2,548	282	11.07
Hill	16,673	11	17,654	-981	-5.56
Jefferson	10,049	19	7,939	2,110	26.58
Judith Basin	2,329	43	2,282	47	2.06
Lake	26,507	9	21,041	5,466	25.98
Lewis and Clark	55,716	6	47,495	8,221	17.31
Liberty	2,158	45	2,295	-137	-5.97
Lincoln	18,837	10	17,481	1,356	7.76
Madison	6,851	30	5,989	862	14.39
McCone	1,977	47	2,276	-299	-13.14
Meagher	1,932	48	1,819	113	6.21
Mineral	3,884	39	3,315	569	17.16
Missoula	95,802	2	78,687	17,115	21.75
Musselshell	4,497	36	4,106	391	9.52
Park*	15,694	12	14,562	1,132	7.77
Petroleum	493	56	519	-26	-5.01
Phillips	4,601	35	5,163	-562	-10.89
Pondera	6,424	32	6,433	-9	-0.14
Powder River	1,858	49	2,090	-232	-11.10
Powell	7,180	28	6,620	560	8.46
Prairie	1,199	52	1,383	-184	-13.30
Ravalli	36,070	7	25,010	11,060	44.22
Richland	9,667	20	10,716	-1,049	-9.79
Roosevelt	10,620	17	10,999	-379	-3.45
Rosebud	9,383	23	10,505	-1,122	-10.68
Sanders	10,227	18	8,669	1,558	17.97
Sheridan	4,105	38	4,732	-627	-13.25
Silver Bow	34,606	8	33,941	665	1.96
Stillwater	8,195	26	6,536	1,659	25.38
Sweet Grass	3,609	40	3,154	455	14.43
Teton	6,445	31	6,271	174	2.77
Toole	5,267	34	5,046	221	4.38
Treasure	861	55	874	-13	-1.49
Valley	7,675	27	8,239	-564	-6.85
Wheatland	2,259	44	2,246	13	0.58
Wibaux	1,068	53	1,191	-123	-10.33
Yellowstone	129,352	1	113,419	15,933	14.05

*The county equivalent of Yellowstone National Park (population 52 in 1990) has been merged into Gallatin County and Park County since 1990.

Source: U.S. Census Bureau Released March 21, 2001

MONTANA INDIAN RESERVATION
DECENNIAL CENSUS TOTAL RESIDENT POPULATION
1990 and 2000

	2000 CENSUS	1990 CENSUS	NUMERIC CHANGE 1990 to 2000	PERCENT CHANGE 1990 TO 2000
Montana	902,195	799,065	103,130	12.91
Blackfeet Reservation and Off-Reservation Trust Land*	10,100	8,549	1,551	18.14
Crow Reservation and Off-Reservation Trust Land	6,894	6,370	524	8.23
Flathead Reservation	26,172	21,259	4,913	23.11
Fort Belknap Reservation and Off-Reservation Trust Land	2,959	2,508	451	17.98
Fort Peck Reservation and Off-Reservation Trust Land	10,321	10,595	-274	-2.59
Northern Cheyenne Reservation and Off-Reservation Trust Land	4,470	3,923	547	13.94
Rocky Boy's Reservation and Off-Reservation Trust Land	2,676	1,954	722	36.95
Turtle Mountain Reservation and Off-Reservation Trust Land, MT--ND--SD (part)**	24	--	--	--

* Off-reservation trust lands, along with reservation lands, constitute the territory over which American Indian tribes have primary governmental authority.Trust land is property associated with a specific American Indian reservation or tribe, held in trust by the federal government. Trust lands recognized in data tabulations are always "off-reservation"; that is, they comprise all tribal and individual trust lands located outside of a reservation boundary. For more detailed information see Appendix A in the Public Law 94-171 Technical Documentation.

** The Montana portion of the Turtle Mountain Reservation and Off-Reservation Trust Land is Trust Land spread over 13 counties. Only three counties have population in them: Roosvelt (12), Sheridan (10) and Daniels (2). The other counties are Blaine, Carter, Chouteau, Fergus, Hill, Liberty, McCone, Phillips, Richland, and Valley.

-- Not available

Compiled by: Census and Economic Information Center, MT Dept. of Commerce (406) 444-2896 4/16/01

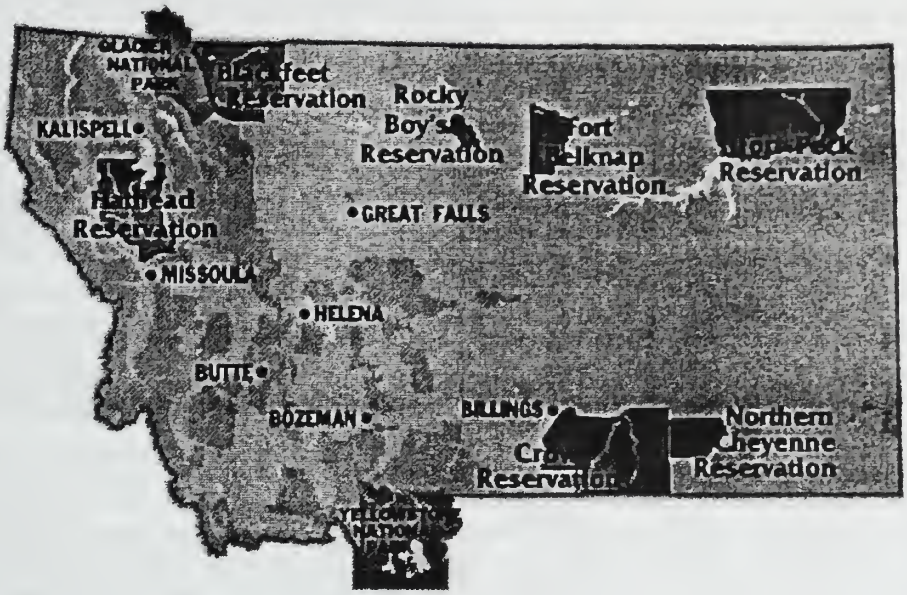
Source: U.S. Census Bureau Released March 21, 2001

Montana Native American Population On and Off Reservations
1980, 1990 and 2000 Census

	2000 Census	1990 Census	1980 Census
Total Number of Native Americans in Montana	**56,068 (6.2%)**	**47,679 (6.0%)**	**37,153 (4.7%)**
Native Americans living OFF Reservations	**19,609 (35.0%)**	**17,255 (36.2%)**	**13,555 (36.5%)**
Native Americans living ON Reservations	**36,459 (65.0%)**	**30,424 (63.8%)**	**23,598 (63.5%)**

	Total Reservation Population 2000	Native American Reservation Population 2000	Total Reservation Population 1990	Native American Reservation Population 1990	Total Reservation Population 1980	Native American Reservation Population 1980
Montana	**63,592**	**36,459**	**55,165**	**30,424**	**49,564**	**23,598**
Blackfeet Reservation	10,100	8,507	8,549	7,025	6,660	5,080
Crow Reservation & Trust Lands	6,894	5,165	6,370	4,724	5,973	3,953
Flathead Reservation	26,172	6,999	21,259	5,130	19,628	3,771
Fort Belknap Reservation & Trust Lands	2,959	2,790	2,508	2,338	2,060	1,870
Fort Peck Reservation	10,321	6,391	10,595	5,782	9,921	4,273
Northern Cheyenne Reservation & Trust Lands	4,470	4,029	3,923	3,542	3,664	3,101
Rocky Boy's Reservation & Trust Lands	2,676	2,578	1,954	1,882	1,650	1,549
Crow/Northern Cheyenne Area	--	--	7	1	8	1

Source: U.S. Bureau of the Census
Compiled by the Census and Economic Information Center, Montana Department of Commerce, (406) 444-2896 , August 2001
I:\census2000\809000reservation.xls



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Montana Reservation Information

- Blackfeet
- Crow
- Flathead
- Fort Belknap
- Fort Peck
- Northern Cheyenne
- Rocky Boy's

U.S. Census Bureau American FactFinder

GCT-PH1. **Population, Housing Units, Area, and Density: 2000**
Data Set: Census 2000 Summary File 1 (SF 1) 100-Percent Data
Geographic Area: **Montana -- American Indian Area**

NOTE: For information on confidentiality protection, nonsampling error, and definitions, see http://factfinder.census.gov/home/en/datanotes/expsf1u.htm

Geographic area	Population	Housing units	Area in square miles			Density per square mile of land area	
			Total area	Water area	Land area	Population	Housing units
AMERICAN INDIAN RESERVATION AND OFF-RESERVATION TRUST LAND--FEDERAL							
All areas	63,616	25,306	13,357.95	180.37	13,177.58	4.8	1.9
Blackfeet Reservation and Off-Reservation Trust Land, MT	10,100	3,583	2,400.67	29.23	2,371.44	4.3	1.5
Blackfeet Reservation	10,100	3,583	2,400.56	29.23	2,371.33	4.3	1.5
Blackfeet Off-Reservation Trust Land	0	0	0.11	0.00	0.11	0.0	0.0
Crow Reservation and Off-Reservation Trust Land, MT	6,894	2,280	3,606.54	12.98	3,593.56	1.9	0.6
Crow Reservation	6,894	2,280	3,575.05	12.87	3,562.18	1.9	0.6
Crow Off-Reservation Trust Land	0	0	31.49	0.11	31.38	0.0	0.0
Flathead Reservation, MT	26,172	12,679	2,057.35	119.26	1,938.09	13.5	6.5
Fort Belknap Reservation and Off-Reservation Trust Land, MT	2,959	967	1,018.37	4.30	1,014.06	2.9	1.0
Fort Belknap Reservation	2,959	967	973.09	4.16	968.93	3.1	1.0
Fort Belknap Off-Reservation Trust Land	0	0	45.28	0.14	45.13	0.0	0.0
Fort Peck Reservation and Off-Reservation Trust Land, MT	10,321	3,755	3,302.21	12.82	3,289.39	3.1	1.1
Fort Peck Reservation	10,321	3,755	3,301.84	12.82	3,289.02	3.1	1.1
Fort Peck Off-Reservation Trust Land	0	0	0.37	0.00	0.37	0.0	0.0
Northern Cheyenne Reservation and Off-Reservation Trust Land, MT--SD (part)	4,470	1,328	706.08	0.14	705.94	6.3	1.9
Northern Cheyenne Reservation	4,470	1,328	697.28	0.14	697.14	6.4	1.9
Northern Cheyenne Off-Reservation Trust Land (part)	0	0	8.80	0.01	8.80	0.0	0.0
Rocky Boy's Reservation and Off-Reservation Trust Land, MT	2,676	698	171.59	0.17	171.42	15.6	4.1
Rocky Boy's Reservation	1,605	426	88.38	0.12	88.26	18.2	4.8
Rocky Boy's Off-Reservation Trust Land	1,071	272	83.22	0.05	83.16	12.9	3.3
Turtle Mountain Reservation and Off-Reservation Trust Land, MT--ND--SD (part)	24	16	95.14	1.46	93.68	0.3	0.2
Turtle Mountain Off-Reservation Trust Land (part)	24	16	95.14	1.46	93.68	0.3	0.2

(X) Not applicable
Source: U.S. Census Bureau, Census 2000 Summary File 1

Subject Characteristic: Hispanic or Latino/Not Hispanic or Latino, by Race

Definition : The data on the Hispanic or Latino population were derived from answers to a question that was asked of all people. The terms "Spanish," "Hispanic origin," and "Latino" are used interchangeably. Some respondents identify with all three terms while others may identify with only one of these three specific terms. Hispanics or Latinos who identify with the terms "Spanish," "Hispanic," or "Latino" are those who classify themselves in one of the specific Spanish, Hispanic, or Latino categories listed on the questionnaire ("Mexican," "Puerto Rican," or "Cuban") as well as those who indicate that they are "other Spanish/Hispanic/Latino." People who do not identify with one of the specific origins listed on the questionnaire but indicate that they are "other Spanish, Hispanic, or Latino" are those whose origins are from Spain, the Spanish-speaking countries of Central or South America, the Dominican Republic, or people identifying themselves generally as Spanish, Spanish-American, Hispanic, Hispano, Latino, and so on. All write-in responses to the "other Spanish/Hispanic/Latino" category were coded.

Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or the person's parents or ancestors before their arrival in the United States. People who identify their origin as Spanish, Hispanic, or Latino may be of any race.

Some tabulations are shown by the origin of the householder. In all cases where the origin of households, families, or occupied housing units is classified as Spanish, Hispanic, or Latino, the origin of the householder is used. (See the discussion of householder under "Household Type and Relationship.")

If an individual could not provide a Hispanic origin response, their origin was assigned using specific rules of precedence of household relationship. For example, if origin was missing for a natural-born daughter in the household, then either the origin of the householder, another natural-born child, or spouse of the householder was assigned. If Hispanic origin was not reported for anyone in the household, the Hispanic origin of a householder in a previously processed household with the same race was assigned. This procedure is a variation of the general imputation procedures described in "Accuracy of the Data" and is similar to those used in 1990, except for Census 2000 race and Spanish surnames were used to assist in assigning an origin (see the "Comparability" section below also).

Comparability. There are two important changes to the Hispanic origin question for Census 2000. First, the sequence of the race and Hispanic origin questions for Census 2000 differs from that in 1990; in 1990, the race question preceded the Hispanic origin question. Testing prior to Census 2000 indicated that response to the Hispanic origin question could be improved by placing it before the race question without affecting the response to the race question. Second, there is an instruction preceding the Hispanic origin question indicating that respondents should answer both the Hispanic origin and the race questions. This instruction was added to give emphasis to the distinct concepts of the Hispanic origin and race questions, and to emphasize the need for both pieces of information.

Furthermore, there has been a change in the processing of the Hispanic origin and race responses. In the 1990 census, respondents provided Hispanic origin responses in the race question and race responses in the Hispanic origin question. In 1990, the Hispanic origin question and the race question had separate edits; therefore, although information may have been present on the questionnaire, it was not fully utilized due to the discrete nature of the edits. However, for Census 2000 there is a joint race and Hispanic origin edit which can utilize Hispanic origin and race information that was reported in the inappropriate question.

For more information on Hispanic or Latino, please telephone (301) 457-2403.

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To maintain confidentiality, the Census Bureau applies statistical procedures that introduce some uncertainty into data for small geographic areas with small population groups. The census results in this table contain nonsampling error, but do not contain sampling error. Data users who create their own estimates using data from American FactFinder tables should cite the Census Bureau as the source of the original data only. See also definitions of subject characteristics and geographic definitions. The data in this table have not been adjusted for estimated net census coverage error based on the results of the Accuracy and Coverage Evaluation.

For the full technical documentation for the Census 2000 Summary File 1 (SF1), which is the source of data in this table, see http://www.census.gov/prod/cen2000/doc/sf1.pdf.

The letters PDF or symbol indicate a document is in the Portable Document Format (PDF). To view file you will need the Adobe(R) Acrobat(R) Reader which is available for **free** from the Adobe web site.

U.S. Census Bureau

UNITED STATES DEPARTMENT OF COMMERCE NEWS WASHINGTON, DC 20230

ECONOMICS AND STATISTICS ADMINISTRATION

BUREAU OF THE CENSUS

FOR IMMEDIATE RELEASE
WEDNESDAY, MARCH 28, 2001

Public Information Office
301-457-3691/301-457-3620 (fax)
301-457-1037 (TDD)

CB01-CS.04

Statement of William G. Barron, Acting Census Bureau Director, Regarding Census 2000 Undercount Estimates Released Today

The Presidential Members of the U.S. Census Monitoring Board today released data that they describe as representing Census 2000 undercounts for all fifty states and five U.S. cities.

As part of the policy of transparency for Census 2000, we have provided extensive, perhaps unprecedented, data and other information to our oversight bodies. This is the only way the estimates released today could have been calculated. It appears that both the population counts and the methodology used to calculate them are seriously flawed.

For instance, our review of the data made available to the oversight bodies indicates that the estimated undercount for New York should be below, not above, the national average.

It is important to note that the Census Bureau is not in a position to release a final estimate for any state or city, and believes that the most accurate data currently available are the unadjusted data already released. This is because of the uncertainties discovered in analyzing results of the Accuracy and Coverage Evaluation, including the comparison with demographic analysis, as we examined the Census 2000 undercount.

Our work to resolve these uncertainties continues. Secretary Evans and I testified before the Senate Commerce Committee today that the Census Bureau would continue its work in this area and expects to make a recommendation this fall as to the future potential uses of adjusted data.

While we have received many requests for the Census Bureau to release the data currently under analysis, I ask for patience in this regard until we can resolve the technical issues the ESCAP committee discovered.

-X-

Source: U.S. Census Bureau
Public Information Office
(301) 457-3030
Last Revised: March 29, 2001 at 08:12:20 AM

Montana Labor Force by Reservation

Annual Average 2000

2001 BMK

Reservation	CIVILIAN LABOR FORCE	EMPLOY-MENT	UNEMPLOY-MENT	UNEMPLOYMENT RATE
Montana Reservation Average	25,525	22,494	3,031	11.9%
Blackfeet	3,320	2,663	657	19.8%
Crow	2,924	2,295	629	21.5%
Flathead	12,352	11,640	712	5.8%
Fort Belknap	758	612	146	19.3%
Fort Peck	4,273	3,810	463	10.8%
Northern Cheyenne	1,413	1,120	293	20.7%
Rocky Boy's	485	354	131	27.0%

Source: Montana Department of Labor & Industry, Research & Analysis Bureau, Local Area Unemployment Statistics (LAUS)

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Montana Labor Market Information

2000 Annual Average Labor Force By County

2001 BMK

COUNTY	CIVILIAN LABOR FORCE	EMPLOY-MENT	UNEMPLOY-MENT	UNEMPLOYMENT RATE
MONTANA	479,132	455,608	23,524	4.9%
YELLOWSTONE	72,921	70,158	2,763	3.8%
CASCADE	37,622	35,727	1,895	5.0%
MISSOULA	55,603	53,746	1,857	3.3%
BEAVERHEAD	4,877	4,680	197	4.0%
BIG HORN	5,871	5,024	847	14.4%
BLAINE	2,937	2,739	198	6.7%
BROADWATER	2,157	2,057	100	4.6%
CARBON	4,883	4,632	251	5.1%
CARTER	1,098	1,075	23	2.1%
CHOUTEAU	2,960	2,869	91	3.1%
CUSTER	6,153	5,887	266	4.3%
DANIELS	1,331	1,291	40	3.0%
DAWSON	5,241	5,068	173	3.3%
DEER LODGE	4,008	3,683	325	8.1%
FALLON	1,675	1,615	60	3.6%
FERGUS	6,530	6,149	381	5.8%
FLATHEAD	38,645	36,271	2,374	6.1%
GALLATIN	43,810	42,626	1,184	2.7%
GARFIELD	1,095	1,053	42	3.8%
GLACIER	5,396	4,686	710	13.2%
GOLDEN VALLEY	599	565	34	5.7%
GRANITE	1,260	1,165	95	7.5%
HILL	9,032	8,577	455	5.0%
JEFFERSON	5,260	4,993	267	5.1%
JUDITH BASIN	1,245	1,191	54	4.3%
LAKE	12,674	11,894	780	6.2%
LEWIS & CLARK	28,464	27,251	1,213	4.3%
LIBERTY	1,230	1,190	40	3.3%
LINCOLN	7,016	6,195	821	11.7%
MCCONE	1,326	1,284	42	3.2%
MADISON	4,051	3,892	159	3.9%
MEAGHER	1,126	1,045	81	7.2%
MINERAL	1,682	1,531	151	9.0%
MUSSELSHELL	1,868	1,729	139	7.4%
PARK	10,467	9,908	559	5.3%
PETROLEUM	382	361	21	5.5%
PHILLIPS	2,388	2,273	115	4.8%
PONDERA	3,494	3,334	160	4.6%
POWDER RIVER	1,319	1,280	39	3.0%
POWELL	2,588	2,463	125	4.8%
PRAIRIE	710	680	30	4.2%

RAVALLI	18,085	17,137	948	5.2%
RICHLAND	5,758	5,399	359	6.2%
ROOSEVELT	4,358	3,943	415	9.5%
ROSEBUD	4,646	4,298	348	7.5%
SANDERS	4,319	3,969	350	8.1%
SHERIDAN	2,182	2,085	97	4.4%
SILVER BOW	16,866	15,828	1,038	6.2%
STILLWATER	4,883	4,646	237	4.9%
SWEET GRASS	1,848	1,801	47	2.5%
TETON	3,541	3,395	146	4.1%
TOOLE	2,961	2,859	102	3.4%
TREASURE	524	498	26	5.0%
VALLEY	4,296	4,121	175	4.1%
WHEATLAND	1,271	1,213	58	4.6%
WIBAUX	607	582	25	4.1%
L & C/JEFFERSON LMA	33,725	32,244	1,481	4.4%

Source: Montana Department of Labor & Industry, Research & Analysis Bureau, Local Area Unemployment Statistics

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data

country-level poverty rates

Data for Montana
Go to the map to select a state
Percent **Number**
Click a column name to sort the table by that column.

			All People In Poverty (1998)			Children Ages 0 Thru 17 (1998)		
				90% Confidence Interval Of Estimate			90% Confidence Interval Of Estimate	
	FIPS*	AREA	Percent	Lower Bound	Upper Bound	Percent	Lower Bound	Upper Bound
1	30000	Montana	15.7%	14.7%	16.8%	21.9%	19.5%	24.3%
2	30001	Beaverhead County	17.6%	14.0%	21.2%	22.9%	17.7%	28.2%
3	30003	Big Horn County	28.8%	22.7%	34.9%	32.8%	25.1%	40.5%
4	30005	Blaine County	28.0%	22.1%	33.9%	32.7%	25.0%	40.3%
5	30007	Broadwater County	16.3%	12.9%	19.6%	21.6%	16.5%	26.7%
6	30009	Carbon County	13.4%	10.5%	16.3%	17.1%	13.0%	21.3%
7	30011	Carter County	19.2%	14.2%	24.2%	26.5%	17.9%	35.1%
8	30013	Cascade County	14.7%	11.8%	17.7%	21.6%	16.7%	26.5%
9	30015	Chouteau County	13.5%	10.3%	16.7%	18.2%	13.0%	23.5%
10	30017	Custer County	17.9%	14.2%	21.6%	25.7%	19.8%	31.6%
11	30019	Daniels County	15.6%	12.0%	19.2%	23.4%	16.6%	30.2%
12	30021	Dawson County	13.1%	10.3%	15.9%	19.6%	14.6%	24.7%
13	30023	Deer Lodge County	18.2%	14.4%	22.0%	26.2%	19.9%	32.4%
14	30025	Fallon County	13.6%	10.7%	16.5%	17.1%	12.9%	21.2%
15	30027	Fergus County	16.0%	12.6%	19.4%	21.9%	16.6%	27.1%

16	30029	Flathead County	14.6%	11.6%	17.5%	21.0%	16.2%	25.8%
17	30031	Gallatin County	12.1%	9.6%	14.7%	15.6%	11.9%	19.2%
18	30033	Garfield County	13.7%	9.8%	17.7%	17.7%	10.6%	24.7%
19	30035	Glacier County	35.6%	27.9%	43.4%	38.9%	29.6%	48.1%
20	30037	Golden Valley County	23.2%	17.8%	28.7%	21.8%	15.4%	28.1%
21	30039	Granite County	19.6%	15.5%	23.7%	27.5%	20.8%	34.3%
22	30041	Hill County	19.8%	15.8%	23.9%	25.6%	19.8%	31.3%
23	30043	Jefferson County	10.1%	7.8%	12.4%	14.0%	10.3%	17.7%
24	30045	Judith Basin County	18.6%	14.4%	22.8%	24.6%	18.1%	31.0%
25	30047	Lake County	21.1%	16.7%	25.4%	26.7%	20.4%	33.1%
26	30049	Lewis and Clark County	12.3%	9.7%	14.8%	18.5%	14.2%	22.8%
27	30051	Liberty County	15.2%	11.1%	19.2%	16.0%	10.8%	21.1%
28	30053	Lincoln County	19.0%	15.0%	23.0%	26.0%	19.8%	32.2%
29	30055	McCone County	15.5%	11.8%	19.3%	19.9%	14.0%	25.8%
30	30057	Madison County	12.6%	9.7%	15.5%	17.5%	12.6%	22.4%
31	30059	Meagher County	22.6%	17.2%	27.9%	26.9%	19.9%	33.8%
32	30061	Mineral County	20.7%	16.2%	25.2%	30.1%	22.8%	37.4%
33	30063	Missoula County	14.7%	11.7%	17.7%	20.0%	15.4%	24.5%
34	30065	Musselshell County	19.6%	15.2%	24.0%	26.9%	19.9%	33.8%
35	30067	Park County	13.6%	10.7%	16.5%	19.0%	14.5%	23.5%
36	30069	Petroleum County	18.8%	13.9%	23.6%	21.3%	14.5%	28.1%
37	30071	Phillips County	21.4%	16.9%	26.0%	27.2%	20.7%	33.6%
38	30073	Pondera County	22.1%	17.3%	26.9%	27.1%	20.6%	33.6%
39	30075	Powder River County	16.6%	12.6%	20.6%	22.2%	15.6%	28.7%
40	30077	Powell County	18.7%	14.6%	22.7%	25.6%	19.5%	31.8%
		Prairie						

41	30079	County	13.5%	10.3%	16.7%	17.4%	12.5%	22.3%
42	30081	Ravalli County	15.3%	12.0%	18.6%	21.8%	16.5%	27.2%
43	30083	Richland County	15.3%	12.1%	18.4%	20.1%	15.4%	24.7%
44	30085	Roosevelt County	31.7%	24.9%	38.5%	38.5%	29.4%	47.6%
45	30087	Rosebud County	21.0%	16.5%	25.4%	26.7%	20.6%	32.7%
46	30089	Sanders County	19.3%	15.3%	23.3%	25.2%	19.1%	31.2%
47	30091	Sheridan County	13.7%	10.8%	16.7%	19.5%	14.2%	24.8%
48	30093	Silver Bow County	16.3%	13.0%	19.7%	24.6%	18.8%	30.4%
49	30095	Stillwater County	10.6%	8.4%	12.9%	14.3%	10.8%	17.8%
50	30097	Sweet Grass County	13.3%	10.3%	16.4%	18.3%	13.2%	23.4%
51	30099	Teton County	16.4%	12.8%	19.9%	20.7%	15.7%	25.8%
52	30101	Toole County	17.4%	13.7%	21.0%	20.8%	16.0%	25.7%
53	30103	Treasure County	16.8%	12.9%	20.7%	24.2%	17.2%	31.1%
54	30105	Valley County	18.1%	14.3%	21.8%	25.4%	19.5%	31.3%
55	30107	Wheatland County	22.0%	17.2%	26.7%	27.4%	20.5%	34.3%
56	30109	Wibaux County	18.3%	14.2%	22.4%	23.7%	17.4%	29.9%
57	30111	Yellowstone County	12.4%	9.9%	14.9%	18.4%	14.2%	22.6%

Sources: Bureau of the Census, Small Area Income and Poverty Estimates.

These FIPS codes uniquely identify each county by State and are part of the Federal Information Processing Standards developed by the National Institute of Standards and Technology [NIST], U.S. Department of Commerce. Of the 5 digit codes, the first 2 digits are the State code and the last three digits are the county code. For States in the 1 to 9 code range, the FIPS code is only 4 digits long as the leading zero of the 2-digit State code is not shown. For more information on FIPS code standards see the [NIST FIPS] publication page and look for FIPSPUB5-2 and FIPSPUB6-4.

for more information, contact: Tim Parker
web administration: webadmin@ers.usda.gov
page updated: December 27, 2001

APPENDIX B

APPENDIX B

CONTACT AND DISTRIBUTION LISTS MEMO

Blackfeet Nation
Blackfeet Indian Reservation
PO Box 850
Browning, MT 59417
Earl Old Person
Chairman
Phone: 406/ 338-7521
Fax:

Earl Old Person	Chairman
Darrell "Gordo" Horn	Vice-Chairman
406/ 338-7522	
Gordan Monrow	Secretary

Confederated Salish and Kootenai Tribes
Flathead Indian Reservation
Salish & Kootenai Tribal Council
P.O. Box 278
Pablo, MT 59855
Donald "Frederick" Matt
Chairman
Phone: 406/675-2700
Fax: 406/675-2806

Donald "Frederick" Matt	Chairman
Jamie Hamel	Vice-Chairman
Carole Lankford	Secretary

Chippewa Cree
Rocky Boy Reservation
Chippewa Cree Tribal Council
RR 1, Box 544
Box Elder, MT 59521
Alvin Windy Boy, Sr.
Chairman
Phone: 406/395-4282
Fax: 406/395-4497

Alvin Windy Boy, Sr.	Chairman
Bruce Sunchild, Sr.	Vice-Chairman
Janice Meyers	Secretary

Assiniboine & Gros Ventre
Fort Belknap Indian Reservation
Ft. Belknap Community Councel
RR 1, Box 66
Harlem, MT 59526
Joseph McConnell
Chairman
Phone: 406/353-2205
Fax: 406/353-2797

Joseph (Joe) McConnell	Chairman
Benjamin Speak Thunder	Vice-Chairman
Clarena Werk	Secretary
Doreen Bell	Chief Admin Officer

Assiniboine & Sioux
Fort Peck Reservation
Tribal Executive Board
P.O. Box 1027
Poplar, MT 59255
Phone: 406/ 768-5155
Fax: 406/768-5478

Arlyn Headdress	Chairman

Northern Cheyenne Northern Cheyenne Reservation Northern Cheyenne Tribal Council P.O. Box 128 Lame Deer, MT 590 Phone: 406/477-6284 Fax: 406/477-6210	Geri Small John Woodenlegs, Jr.	Chairman Vice-Chairman
Crow Nation Crow Reservation Crow Tribal Council PO Box 159 Crow Agency, MT 59022 Clifford Birdinground Chairman Phone: 406/638-2601 Fax: 406/638-7283	Clifford Birdinground Vincent Goes Ahead Larney Little Owl	Chairman Vice-Chairman Vice-Secretary
Little Shell Band of Chippewa Cree Little Shell Tribe Box 1384 105 Smelter Ave Mini Mall Great Falls, MT 59403 Phone: 406/452-2892 Fax: 406/452-2982	Tim Zimmerman	Chairman
Urban Indian Centers/Health Clinics		
Helena Indian Alliance 436 N. Jackson Helena, MT 59601 442-9244	Darren Melton	Director
Indian Health Clinic 1220 Central, Suite 2B Great Falls, MT 59401 268-1510	DJ Lott	Director
Billings Indian Health Board PO Box 203 Billings, MT 59103 245-7372	Mike Lande	Director

MUIA 207 North Broadway, Food Court Level Billings, MT 59101 247-5069	Mike LaFromboise	Acting Director

Contract Indian Health Services Providers

North American Indian Alliance PO Box 285 Butte, MT 59701 782-0461	Moke Eagle Feathers	Director
Missoula Indian Center 2300 Regent Street, Suite A Missoula, MT 59801-7939 329-3373	Carol Meyers	Director
Mile City Center 504 Main Box 726 Mile City, MT 59301 232-6112	Ernie Bighorn	Director

Tribal Reservation Hospitals
- Browning
- Crow Agency
- Rocky Boy

Federal Agencies
- Bureau of Indian Affairs;
- Office of Minority Health

Indian Health Service

Billings Area IHS	Diane Jeanotte Area Child and Maternal Health Officer	247-7125

Rural Employment Opportunities (REO);
- Rural Employment Opportunities Inc.
- Central Administrator
- 318 N Last Chance Gulch
- Helena, MT 59601
- Sharon Liederman
- 442-7850

APPENDIX C

DATA SHEET AND COMMUNICATIONS

Data Collection Form

Proposal for an assessment of the health status of minority populations and review of communication systems regarding health issues.

Agency_____
Type of Agency_____
Address_____

Contact Person_____
Telephone_____ Fax_____
E-Mail_____
Web Page_____

Study/Report_____
Date of Study_____
Publication Date_____
Validity Range_____
Reliability Range_____
Was data collected as standard operating procedure?_____
What form is data in?_____
Year of data gathering/analysis (if different from report)_____
Who collected the data?_____

Who analyzed the data?_____

Who funded the data?_____

GCS

GENESIS COUNSELING SERVICES

4507 PORCUPINE DRIVE • HELENA, MONTANA • 59602 • (406) 443-2683 • FAX (406) 449-7324 • genesis@ixi.net

COMMUNICATIONS MEMO

Date: _____ **Time:** _____

GCS Contact: _____
Contacted by: ____Phone ____ In Person ____ Letter ____Fax _____E-Mail
Project Name: _____

Name: _____
Address: _____
Agency/Firm:_____
Phone #: _____
Fax #: _____

MEMO:

4507 PORCUPINE DRIVE • HELENA, MONTANA • 59602 • (406) 443-2683 • FAX (406) 449-7324 • genesis@ixi.net

APPENDIX D

APPENDIX D

LIST OF COMPILED INFORMATION: EXISTING REPORTS, STUDIES AND DATA

#	AGENCY	CITY	ZIP	CONTACT	TITLE	PHONE	NOTES	Comments	Other	Studies
	WESTERN MDNTANA									
1	St. Peter's Hospital	Helena, MT	59601	Yvonne Beasley	Administrative Executive	406-444-2480	None in Hospital			
2	St. Peter's Hospital	Helena, MT	59601	Jenny Nemek	ER Administrator	406-444-2202	-- No Studies --			
3	St. Peter's Hospital	Helena, MT	59601	Tamora (Professional Quality Service Dept)	Receptionist	406-444-2480	no studies. Referal to DPHHS-Mountain Pacific Quality Health Foundation 443-4020			
4	Wheatland Memorial Hospital	Harlowton, MT	59036	Lori Pritchard, R.N.	Director of Nursing		demonstration project designed to provide outreach education and health promotion to the Duncan Colony at Two Dot			
5	Dffice of Public Assistance for Flathead County	Kalispell, MT	59903	Casandra		406-751-5900	has no information and did not know of any other resources			
6	Flathead Tribal Health and Human Services	St. Ignatius, MT	59865	Lorrie Meeks		406-745-3525	needs to go throughtribal council. Sent letter on 11/15/01. She will contact us.			
7	Fort Belknap Service Unit-Harlem	Harlem, MT	59526	Desree Bell (Quality Assurance)	Acting Clinical Director	406-353-3100	RPMS system- outstanding ,IHS, everything we do is entered. 7 service unit.	trouble finding dentist, covered under federal tort, tribal health accountability, tribal health and IHS are 2 different entities and don't always work together well, CD, diabetes, FAS, tobacco, cervical and breast program	will help out. Plus continuing quality, health needs, top 10 diagnosis, high risk area. Chester went to CDC, TB, need stop and drop optomotry, physical therapy, lab, nutritionist, dental. Denise Engle, state/IHS	
8	Fort Peck Service Unit-Poplar	Poplar, MT	59255	Julie Bemer, DPHN	Clinical Director	406-768-3491	-- No Studies --			
9	Rocky Boy Service Unit	Box Elder, MT	59521	Connie Florez		406-395-4486 ext 244	No specific studies	Need some funding		
10	Rocky Boy Service Unit	Box Elder, MT	59521	Janet Runyon		406-395-4486	-- No Studies --			
11	Rocky Boy Service Unit	Box Elder, MT	59521	Sybil Sangrey	Planning Director	406-395-4982	-- No Studies --			
12	Blackfeet Service Unit - Browning	Browning, MT		Reis Fisher	Service unit Director	406-338-6154	-- No Studies --			
13	Blackfeet Service Unit - Browning	Browning, MT		Jennifer Swanson	Clinical Director	406-338-6200	-- No Studies --			
14	Mountain Pacific Quality Health Foundation	Helena, MT	59601	Sarah Melody		406-443-4020	no studies, referals to Todd Harwell and Billings area IHS			
15	Planned Parenthood	Helena, MT	59601	Deb	Director/Program Manager	406-443-7676	no studies			
16	Harm Reduction Center	Missoula, MT	59801	Vicki Peterson	or 406-544-5821	406-721-3000 ext 1140	has referals and observations of IV drug use. Possible focus group member. Will send any information she has.			
17	Rural Employment Opportunites	Helena, MT	59624	Sharon Liederman	Director	406-442-7850	reo@mt.net and www.mt.net/REO Migrant workers getting healthcare in Billings.	serving more Native Americans, Dental Health Issues	Incidence of Cancer and Incidenc of accidents of migrant Children	contracted with National Cancer Institute and OSHA
18	The Commonwealth Fund	New York, NY	10021-2692	Ruth T Perot/Mara Youdelman		212-606-3800	foundation established 1918, www.cmwf.org			Racial, Ethnic + Primary Language, Data collection in the Health Cary system: An assessment of federal policies and practices
19	DPHHS	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	Center for Disease Control Prevention, Division of Diabetes Translation funded a diabetes in Native American youth study. (tharwell@state.mt.us)			Establishing Surveillance for Diabetes in American Indian Youth
20	DPHHS	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	Center for Disease Control Prevention, Division of Diabetes Translation funded a diabetes in Native American youth study. (tharwell@state.mt.us)			Establishing Surveillance for Diabetes in American Indian Youth
21	DPHHS	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	a Montana specific study (tharwell@state.mt.us)			Prevalence of Cardiovascular Disease and Related Risk Factors in American Indian and Non-Indian Adults in Montana, 1999
22	DPHHS	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	study discusses minority populations in MT (tharwell@state.mt.us)			Increasing Prevalence of Diagnosed Diabetes and Obesity
23	DPHHS	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	study discusses minority populations in MT (tharwell@state.mt.us)			Improving Diebetes Care for American Indians in Montana and wyoming
24	DPHHS	Helena, MT	59620	Todd S. Harwell, MPH	Program Coordinator, Montana Diabetes Project	406-444-1437	study discusses minority populations in MT (tharwell@state.mt.us)			Cardiovascular Disease and Risk Factors in Montana American Indians and Non-Indians.
25	DPHHS	Helena, MT	59620	Jason Swant		406-444-1437	montana Native American studies			the Montana Tobacco Quitline: A new statewide Resource to help people quit tobacco
26	DPHHS	Helena, MT	59620			406-444-1437	study discusses minority populations in MT (tharwell@state.mt.us)			Montana Tobacco Use Prevention Program
27	DPHHS	Helena, MT	59620	Phyliss MacMillan	Program Director, Addictive and Mental Disorders Division	406-444-7044	yes, just completed study. She'll send us copy. Pmacmillan@state.mt.us	referred by Vicki Peterson and IHS	validity range +05, reliability range +05	Native American Substance Abuse Treatment Needs Assesment
28	DPHHS	Helena, MT	59620	L McNamara, Bill Riley, MSW (Gemini Consulting)	Addictive and Mental Disorders Division	406-444-3964	lmcnamara@state.mt.us www.dphhs.state.mt.uss/divisions/amd/substance use disorders.htm			2 studies: Substance Use Disorders Needs Assessment Summary 1) The Adult Householdd Telephone Survey and 2) Inmates in Montana's Correctional System.
29	Wyoming Minority Health Program - Maternal and Child						bsones@state.wy.us or wypca@aol.com			An Assessment of the Health Status of Minority Populations in Wyoming
30	Office of Indian Affairs	Helena, MT		Bruce Meyers	Director	406-444-3703	-- No Studies --			
31	Dffice of Indian Affairs	Helena, MT		Lori Ryan	Administrative Assistant	406-444-3703	they have contact lists. No studies. However, lots of information available from census website. Can build talbes. Check with Dave Martin @ Dep of Commerce to assist with building tables.			Census Data available to build tables and conduct studies

#	AGENCY	CITY	ZIP	CONTACT	TITLE	PHONE	NOTES	Comments	Other	Studies
32	Blackfeet Tribal Business Council	Browning, MT	59417	Earl Dld Person	Chair		No studies	would like better communication with government. Need funding. Does not use RPMS		
33	Chippewa Cree Business Committee	Box Elder, MT	59521	Alvin Windy Boy	Chair	406-395-4282	Presently working on dialysis issues			
34	Confederated Salish and Kootenai Tribe	Pablo, MT	59855	Fred Matt	Chair	406-675-2700	HRD Program Thesea Wahl @ ext 1049 and Tribal Health - Lori Meeks 745-3525	Biggest issues associated with Alcohol, heart disease, obesity. Indian people react to outside input differently. They are reluctant to be surveyed and studied. Thinks Judy Martz bas been very good in communication. Welcomed her input. well water –floride		
35	Fort Belknap Tribal Council	Harlem, MT	59526-9998	Joe McConnell	Chair	406-353-2205	no studies			
36	Fort Belknap Tribal Council	Harlem, MT	59526-9998	Kermit	Chair	406-353-8486	no studies	no communication with gov't. don't feel to be taken seriously. Barriers there. Would like an open dialog with gov't. diabitic care. Alcohol and drug abuse keep funding to provide services. need surgery center, bave to transport long distances and patients may be critical. no RPMS		
37	Fort Peck Council (Assiniboine + Sioux)	Poplar, MT	59255	Arlyn Headress	Chair	406-768-5155	Judy Martz has been good	1-800# is impersonal.when there is an issue between tribe & state, contacts after the fact 4-E compact with the state, faster care. Implemented a system without talking with the tribe. Bruce Meyers is good. staff doesn't keep her in the loop		
38	Fort Peck Council (Assiniboine + Sioux)	Poplar, MT	59255	Gary James Melbane	Tribal H	406-768-3491	– No Studies –			
39	Little Shell Tribe of the Chippewa Cree	Great Falls, MT	59403	Tim Zimmerman	Chair	406-452-2892	– No Studies –			
40	Carroll College	Helena, MT	59601	Murpby Fox	Sociology Professor	406-447-4300	be specializes in Native American studiies. No formal or informal studies			
41	Flathead Community College	Kalispell, MT	59901			406-756-3822	did not have any info and refered to Tribal Health			
42	Montana State University-Airogram			Ken Pepion	PhD		demeler@selwary.umt.edu and http://nativenet.uthscsa.edu/archive/ne/az/0013html.			Psycho-Social Adjustment of American Indian college Students
43	Salish Kootenai College	Pablo, MT		Phyllis Scharr		406-675-4800	they haven't done any studies but she has an IHS study. Phyllisscharr@sskc.edu	referred by Vicki Peterson, had IHS study on Regional Differences in Indian Health 1998-1999, people have written thesis but could not publish. CDC		
44	Helena Indian Alliance	Helena, MT	59601	Ed Barrett	CDC	406-442-9244 ext 11	– No Studies –			Tobaco Use of Native Americans
45	Helena Indian Alliance	Helena, MT	59601	Leo Pocha		406-442-9244 ext 12	Summit Project			
46	Helena Indian Alliance	Helena, MT	59601	Daren Melton		406-442-9244 ext 13	– No Studies –			
47	Helena Indian Alliance	Helena, MT	59601	Bonnie LaFontaine		406-442-9244 ext 16	bonlaf@yahoo.com and HIA@MT.net	needs-access to medications and surgery		
48	Helena Indian Alliance	Helena, MT	59601	Sandy		406-442-9244 ext 18	– No Studies –			
49	Helena Indian Alliance	Helena, MT	59601	Beth Sirr	FNP	406-442-9244 ext 20	– No Studies –	Todd Harwell is the Montana Diabetes Project contact.Dr. Kunzweiler, intense issue, gail gray, Dave Lewis. Dr. Kunzweiler, intense issue, gail gray, Dave Lewis. dental, medicaid working poor. 12 diagnoses are not insurable by stat auditor. "there is so much info out there. No one wants to take a look at it.	volume in ER is up 59% and 54 of those are no-pay. need insurance for working poor people. Look at ER. 3-6 dental cases a day. Most of people who go to ER bave no insurance. Can't access prentative dental. Overhead to keep internists in biz. Canada 2% of $ for admiristration.	diabetes
50	Indian Health Clinic	Great Falls, MT	59401	D.J. Lott	Director	406-268-1510	Left second message on 1/4/02			
51	Missoula Indian Center	Missoula, MT	59801-7939	Carol Meyers		406-829-9515	None			
52	Missoula Indian Center	Missoula, MT	59801-7939	Kitty	or 406-329-3373	406-829-9515	has information and will gather and send to us asap	Feels good about communication with government. Could not be specific. More funding. Need a clinic badly.No RPMS		
53	North American Indian Alliance	Butte, MT	59701	Moke Eagle Feathers/Patty Boggs		406-782-0461	Diabetes focus and HIV	Want involvement with government. Feel ousted. Funding. Most people don't have insurance or transportation, car. Serve 25 different tribes. does not use RPMS		
	EASTERN MONTANA									
1	Billings Area Indian Health Services	Billings, MT	59107	Pete Conway	New Director	406-247-7107	none, did not know. www.IHS.gov			
2	Billings Area Indian Health Services	Billings, MT	59107	George Allen	Acting Director	406-247-7099	none, did not know. www.IHS.gov	has communication with state. They are funded by state government. Need funding. they do use RPMS system for data collection		
3	Billings Area Indian Health Services	Billings, MT	59107	Diane L Jeanotte	Area Child and Maternal Health Officer	406-247-7125	She is in charge of all studies and reports that come into Billings Area IHS. 2 studies recently published. She'll send us copies.			Regional Differences in Indian Health
4	Billings Area Indian Health Services	Billings, MT	59107	Diane L Jeanotte	Area Child and Maternal Health Dfficer	406-247-7125	She is in charge of all studies and reports that come into Billings Area IHS. 2 studies recently published. She'll send us copies.		uses 1980, & 1990 census information and 1990-1999 annual information	Trends in Indian Health
5	Billings Area Indian Health Services	Billings, MT	59107	Charles Lewis		406-247-7104				

#	AGENCY	CITY	ZIP	CONTACT	TITLE	PHONE	NOTES	Comments	Other	Studies
6	Billings Area Indian Health Services	Billings, MT	59107	Mike Danielson		406-247-7106				
7	Migrant Health Services	Billings, MT	59101	Claudia Stevens	Director	406-248-3149	usually they are the 1st assess of health service-nurse practiioners and nurses	National Cancer Institute-Multi-tiered project to track relationship bewteen Farm Laborers and cancer. with regard to state-we have to initiate	needs-shortage of dental providers, make it easier for dentists to help. (licensure, malpraactice, etc. gets in the way)	National Cancer Institute-Multi-tiered project to track relationship bewteen Farm Laborers and cancer
8	Migrant Health Services	Billings, MT	59101	Claudia Stevens	Director	406-248-3149	usually they are the 1st assess of health service-nurse practiioners and nurses	cardiovascular with the state	usually they are the 1st assess of health service-nurse practiioners and nurses	worked with State on cardiovascular study. They do a number of things for reporting. Are they a farmworker? Health?
9	Migrant Health Services	Billings, MT	59101	Claudia Stevens	Director	406-248-3149	usually they are the 1st assess of health service-nurse practiioners and nurses	stationaly and mobile oral service		presently putting together an oral program that will be stationary and moble. Had a Pilot for kids. Antiticpating now for addults,
10	Lodge Grass Clinic	Lodge Grass, MT	59050	Dan Gun Shows		406-639-2317	None. Try 406-247-7102 Billings.			
11	Northern Cheyenne-Lame Deer Health Center	Lame Deer, MT	59043	Gina Milligan	Acting Clinical Director	406-477-4400	-- No Studies --			
12	Wolf Point Indiam Health Center	Wolf Point, MT	59201	Charles Headdress	Clinical Director	406-653-1641	no answer to questions			
13	Crow Agency Unit	Crow Agency, MT	59022	Dr. Thomas	Clinical Director	406-638-3500	they will call back. Dr. Robert Byron was past clinical director.			
14	Crow Agency Unit	Crow Agency, MT	59022	Tennyson Doney	Service unit Director	406-638-3461	they will call back			
15	Crow Agency Unit	Crow Agency, MT	59022	Dr Jean Parker		406-638-3500	-- No Studies --			
16	Crow Tribal Council	Crow Agency, MT	59022	Clifford Birdinground	Chair	406-638-3700	also phone 406-638-3715. -- No Studies --			
17	Northern CheyenneTribal Council	Lame Deer, MT	59043	Geri Small	Chair	406-477-6284	none			
18	Northern CheyenneTribal Council	Lame Deer, MT	59043	Marlene Redneck		406-477-8549	none			
19	Montana State University-Billings	Billings, MT	59101	Annette Trinity-Stevens/Evelyn Boswell			annettete@montana.edu www.montna.edu/wwwpb/univ/scholars.html		poor, small data sample, no SOP for data collection. Data was presented at the 9th Undergraduate Scholars Conference at MSU-Bozeman.	Hutterite Health Study
20	Miles City Center	Miles City, MT	59301	Ernie Bighoro	Director	406-232-6112	none	do not communicate with government. need access to health resources, need clinic, need funding for transportation. has heard of RPM but does not have it		
21	Montana United Indian Association	Billings, MT	59101	Mike LaFromboise	Acting Director	406-247-5069	other phones: 443-4939, 247-5068, don't know of any studies	need funding! Would love a clinic.have to travel long distances to get care. would like some part of transportation. does not us RPMS system and they have never heard of it.		

EXISTING STUDIES AND HEALTH ASSESSMENTS

#	Contact Agency	Study	Study Dates	Date Study Published	Funding Agency
1	Wheatland Memorial Hospital-Harlowton	Demonstration project is currently in progress. Outreach education and health promotion to Duncan Colony (Hutterite). Childhood issues, depression assessment, reduction in farm injury to children.	12/01 to 12/02	12/31/03	Montana DPHHS, FCHB
2	Rural Employment Opportunites	REO contracted with National Cancer Institute and OSHA	1999 and 2000 (2 summer seasons)		National REO. Data not counted as Montana statistics, went into national data bases. Did some informal surveys.
3	The Commonwealth Fund	Racial, Ethnic + Primary Language, Data Collection in the Health Care System: An Assessment of Federal Policies and Practices		Sep-01	The commonwealth Fund and Summit Health Institute for Reserch and Education (SHIRE)
4	Montana DPHHS	Establishing Surveillance for Diabetes in American Indian Youth	1997-1999	Jun-01	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
5	Montana DPHHS	Prevalence of Cardiovascular Disease and Related Risk Factors in American Indian and Non-Indian Adults in Montana, 1999	1999	Jan-00	Chronic Desease Prevention and Health Promotion Program, DPHHS
5	Montana DPHHS	Increasing Prevalence of Diagnosed Diabetes and Obesity	1988-1993 to 1994-1999	Oct-00	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
6	Montana DPHHS	The Rise in Overweight and Obesity Among Montanans	1988-1993 to 1994-1999	Jun-01	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
7	Montana DPHHS	Improving Diebetes Care for American Indians in Montana and Wyoming	1994-1999	1994-1999	Montana DPHHS - Montana Diabetes Project and Billings Area Indian Health Service Diabetes Program, Centers for Disease Control and Prevention (CDC), Division of Diabetes Translation
8	Montana DPHHS	Cardiovascular Disease and Risk Factors in Montana American Indians and Non-Indians.		2001	Montana DPHHS - Centers for Disease Control and Prevention (CDC), Division of Diabetes Translation
9	Montana DPHHS	The Montana Tobacco Quit Line: A new statewide Resource to help people quit tobacco		Jan-01	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
10	Montana DPHHS	Montana Tobacco Use Prevention Program (28 community based entities to provide prevention services throughout 40 of Montana's 56 counties)	1999-2000	various dates dependent on tribe receiving funds	DPHHS, funding was cut substantially in 2001.
11	Montana DPHHS	Native American Substance Abuse Treatment Needs Assesment Study	Awarded 1996	Jul-01	Center for Substance Abuse Treatment (CSAT) - "Montana Adult Householdtelephone Survey"

EXISTING STUDIES AND HEALTH ASSESSMENTS

#	Contact Agency	Study	Study Dates	Date Study Published	Funding Agency
12	Montana DPHHS	Montana Behavioral Risk Factor Surveillance System (BRFSS)	1997 - 1998, 1999	April 2000, March 2001	Montana DPHHS - Chronic Desease Prevention and Health Promotion Program
13	Montana DPHHS	Priorities: Montana Health Agenda 2000 (Montana's Healthy People 2010 State Plan)		Jan-00	Montana DPHHS - Health Policy and Services Division
14	Montana DPHHS	Maternal and Child Health Needs Assessment	1995-1999	Jul-00	Montana DPHHS, FCHB
15	Montana DPHHS, Addictive + Mental Disorders Division (AMDD)	Substance Use Disorders Needs Assessment - The Adult Household Telephone Survey	1995-1997 (18 months)	Jul-01	Center for Substance Abuse Treatment (CSAT),
16	Montana DPHHS, Addictive + Mental Disorders Division (AMDD)	Substance Use Disorders Needs Assessment - Inmates in Montána's Correctional System.	1995-1997 (18 months)	Jul-01	Center for Substance Abuse Treatment (CSAT), Substance Use Disorders Needs Assessment Summary
17	Wyoming Minority Health Program - Maternal and Child, Wyoming Primary Care Association (WPCA)	An Assessment of the Health Status of Minority Populations in Wyoming	Sept 2000 - Sept 2001	Sep-01	OMH, U.S. Dept of Health and Human Services
18	Montana State University-Airogram	Psycho-Social Adjustment of American Indian College Students	1988 - 1990	1991	MSU / U of A - AIRO (American Indian Research Office)
19	Helena Indian Alliance	Tobaco Use of Native Americans	1999	2000	DPHHS
20	Billings Area Indian Health Services	Regional Differences in Indian Health	1998-1999	1999	US Dept of Health and Human Services, Indian Health Service, OPH Division of Community and Environmental Health
21	Billings Area Indian Health Services	Trends in Indian Health	1999	1999	US Dept of Health and Human Services, Indian Health Service, OPH Division of Community and Environmental Health
22	Migrant Health Services	National Cancer Institute-Multi-tiered project to track relationship bewteen Farm Laborers and cancer			Federal Dept of Health and Human Services
23	Migrant Health Services	Presently putting together an oral program that will be stationary and moble. Had a Pilot for kids. Antiticpating now for addults,			Federal Dept of Health and Human Services
24	Montana State University-Billings (student study)	Student Hutterite Health Study	1999-Early 2000	May-00	MSU-Billings campus
25	Office of Indian Affairs	2000 Census Data available to build tables and conduct studies			Montana Department of Commerce

APPENDIX E

APPENDIX E

LETTER SENT TO POTENTIAL FOCUS GROUP MEMBERS

GCS

GENESIS COUNSELING SERVICES

October 31, 2001

TO:

SUBJECT: Assessment of the Health Status of Montana's Minority Populations and Review of Communication Systems Regarding Health Issues

Dear Sir or Madam:

Recently, Genesis Counseling Services (a 100% minority owned business) received funding to determine what information is presently available to minority populations in Montana about our health status. We will not be performing any new data-generating health studies, but will be compiling existing studies and reports on the health status Montana's Native American and migrant worker populations (i.e. we are performing a qualitative study of primary data). This project is an attempt by the State of Montana to improve its library of information regarding the health status Native Americans and minorities in this state.

The culmination of this project will likely result in future state and federal funding to provide Native Americans and other Montana minority populations with much needed holistic healthcare. We will be calling you in the next few weeks to further explain the project's scope of work, to let you know tentative arrangements for focus groups meetings and to answer any questions you might have about the project. Although this project will mainly focus on Native Americans and migrant workers, it will also include references to Blacks, Hispanics and other hidden populations.

This project also contains a review of the existing communication systems between the tribes and state and local health agencies. The intent is to assess how present lines of communication are working and to recommend improvements to better serve the tribes.

We need your input to determine what information you have, what information you need and to evaluate present communication systems. All information is to be compiled by December 1, 2001. One of my associates or I will be contacting you in the next couple of weeks to find out what existing assessments and health status data you have in your possession and what existing studies you are aware of. We are looking forward to working with you on this project.

Sincerely,

Julie Gardipee Chriske, MA, MHS, MAC, CCDC

4507 PORCUPINE DRIVE • HELENA, MONTANA • 59602 • (406) 443-2683 • FAX (406) 443-3130 • genesis@ixi.net

Blackfeet Nation
Blackfeet Indian Reservation
PO Box 850
Browning, MT 59417
Earl Old Person
Chairman
Phone: 406/ 338-7521
Fax:

Sent Focus Group Letter 11/2/01

Earl Old Person	Chairman
Darrell "Gordo" Horn	Vice-Chairman
406/ 338-7522	
Gordan Monrow	Secretary

Confederated Salish and Kootenai Tribes
Flathead Indian Reservation
Salish & Kootenai Tribal Council
P.O. Box 278
Pablo, MT 59855
Donald "Frederick" Matt
Chairman
Phone: 406/675-2700
Fax: 406/675-2806

Sent Focus Group Letter 11/2/01

Donald "Frederick" Matt	Chairman
Jamie Hamel	Vice-Chairman
Carole Lankford	Secretary

Chippewa Cree
Rocky Boy Reservation
Chippewa Cree Tribal Council
RR 1, Box 544
Box Elder, MT 59521
Alvin Windy Boy, Sr.
Chairman
Phone: 406/395-4282
Fax: 406/395-4497

Sent Focus Group Letter 11/2/01

Alvin Windy Boy, Sr.	Chairman
Bruce Sunchild, Sr.	Vice-Chairman
Janice Meyers	Secretary

Assiniboine & Gros Ventre
Fort Belknap Indian Reservation
Ft. Belknap Community Councel
RR 1, Box 66
Harlem, MT 59526
Joseph McConnell
Chairman
Phone: 406/353-2205
Fax: 406/353-2797

Sent Focus Group Letter 11/2/01

Joseph (Joe) McConnell	Chairman
Benjamin Speak Thunder	Vice-Chairman
Clarena Werk	Secretary
Doreen Bell	Chief Admin Officer

Assiniboine & Sioux
Fort Peck Reservation
Tribal Executive Board
P.O. Box 1027
Poplar, MT 59255
Phone: 406/ 768-5155
Fax: 406/768-5478

Sent Focus Group Letter 11/2/01

Arlyn Headdress	Chairman

Northern Cheyenne
Northern Cheyenne Reservation
Northern Cheyenne Tribal Council
P.O. Box 128
Lame Deer, MT 590

Sent Focus Group Letter 11/2/01

Phone: 406/477-6284	Geri Small	Chairman
Fax: 406/477-6210	John Woodenlegs, Jr.	Vice-Chairman
Crow Nation Crow Reservation Crow Tribal Council PO Box 159 Crow Agency, MT 59022		Sent Focus Group Letter 11/2/01
Clifford Birdinground Chairman	Clifford Birdinground Vincent Goes Ahead	Chairman Vice-Chairman
Phone: 406/638-2601 Fax: 406/638-7283	Larney Little Owl	Vice-Secretary
Little Shell Band of Chippewa Cree Little Shell Tribe Box 1384 105 Smelter Ave Mini Mall Great Falls, MT 59403 Phone: 406/452-2892 Fax: 406/452-2982	Tim Zimmerman	Sent Focus Group Letter 11/2/01 Chairman
Urban Indian Centers/Health Clinics		
Helena Indian Alliance 436 N. Jackson Helena, MT 59601 442-9244	Darren Melton	Sent Focus Group Letter 11/2/01 Director
Indian Health Clinic 1220 Central, Suite 2B Great Falls, MT 59401 268-1510	DJ Lott	Sent Focus Group Letter 11/2/01 Director
Billings Indian Health Board PO Box 203 Billings, MT 59103 245-7372	Mike Lande	Sent Focus Group Letter 11/2/01 Director
MUIA 207 North Broadway, Food Court Level Billings, MT 59101 247-5069	Mike LaFromboise	Acting Director Sent Focus Group Letter 11/2/01
Contract Indian Health Services Providers		
North American Indian Alliance PO Box 285 Butte, MT 59701 782-0461	Moke Eagle Feathers	Director Sent Focus Group Letter 11/2/01
Missoula Indian Center 2300 Regent Street, Suite A Missoula, MT 59801-7939	Carol Meyers	Director Sent Focus Group Letter 11/2/01

329-3373

Mile City Center
504 Main
Box 726
Mile City, MT 59301
232-6112

Ernie Bighorn Director

Sent Focus Group Letter 11/2/01

Tribal Reservation Hospitals
Browning
Crow Agency
Rocky Boy

Federal Agencies
Bureau of Indian Affairs;
Office of Minority Health

Indian Health Service
Billings Area IHS

Sent Focus Group Letter 11/2/01

Diane Jeanotte 247-7125
Area Child and Maternal Health Officer

Rural Employment Opportunities (REO);
Rural Employment Opportunities Inc.
Central Administrator
318 N Last Chance Gulch
Helena, MT 59601
Sharon Liederman
442-7850

Sent Focus Group Letter 11/2/01